06/20/2008 17:37

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines LIBERTARIAN NATIONAL COMMITTEE 2600 Virginia Ave NW ADDRESS (number and street) Suite 200 Check if different than previously Washington DC 20037 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00255695 Χ REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 05 0 1 2008 05 3 1 2008 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Aaron Starr Type or Print Name of Treasurer Electronically Filed by Aaron Starr 06 20 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name LIBERTARIAN NATIONAL COMMITTEE D D " D 0.5 0 1 2008 0.5 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 113159.23 January 1 (b) Cash on Hand at 147127.91 Begining of Reporting Period ..... 186045.23 675357.02 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 333173.14 788516.25 6(a) and 6(c) for Column B) ..... 221159.62 676502.73 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 112013.52 112013.52 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 12013.82 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE

| Report Covering the Period: From:  | 05 01 2008                    | To: 05 31 2008                    |
|--|-------------------------------|-----------------------------------|
| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
| 11. Contributions (other than loans) From: (a) Individuals/Persons Other                     |                               |                                   |
| Than Political Committees (i) Itemized (use Schedule A)                                      | 93991.89                      | 237600.55                         |
| (ii) Unitemized  | 83733.34                      | 409337.28                         |
| (iii) TOTAL (add<br>Lines 11(a)(i) and (ii)  | 177725.23                     | 646937.83                         |
| (b) Political Party Committees   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines              | 910.00                        | 11955.00                          |
| 11(a)(iii),(b) and (c)) (Carry<br>Totals to Line 33, page 5)                                 | 178635.23                     | 658892.83                         |
| 12. Transfers From Affiliated/Other Party Committees   | 6900.00                       | 14900.00                          |
| 13. All Loans Received   | 0.00                          | 0.00                              |
| <ul><li>14. Loan Repayments Received</li><li>15. Offsets To Operating Expenditures</li></ul> | 0.00                          | 0.00                              |
| (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)                                   | 510.00                        | 1564.19                           |
| to Federal candidates and Other Political Committees   | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.)                                       | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Fund  | ds                            |                                   |
| (a) Non-Federal Account (from Schedule H3)   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5)   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))                      | 186045.23                     | 675357.02                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)                                | 186045.23                     | 675357.02                         |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

|    | II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----|--|-------------------------------|-----------------------------------|
| 1. | Operating Expenditures:  (a) Shared Federal/Non-Federal              |                               |                                   |
|    | Activity (from Schedule H4)  | 0.00                          | 0.00                              |
|    | (i) Federal Share  |                               |                                   |
|    | (ii) Non-Federal Share   | 0.00                          | 0.00                              |
|    | (b) Other Federal Operating  | 221150.62                     | 676207.72                         |
|    | Expenditures   | 221159.62                     | 676327.73                         |
|    | (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))     | 221159.62                     | 676327.73                         |
| 2. | Transfers to Affiliated/Other Party                                  |                               |                                   |
|    | Committees   | 0.00                          | 0.00                              |
| 3. | Contributions to Federal Candidates/Committees                       | 0.00                          | 0.00                              |
| 1  | and Other Political Committees  Independent Expenditure              | 0.00                          | 0.00                              |
| ۲. | (use Schedule E)   | 0.00                          | 0.00                              |
| 5. | Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) | 0.00                          | 0.00                              |
|    | (use Schedule F)   | 0.00                          | 0.00                              |
| 6. | Loan Repayments Made   | 0.00                          | 0.00                              |
|    |  |                               |                                   |
|    | Loans Made   | 0.00                          | 0.00                              |
| 8. | (a) Individuals/Persons Other  | 0.00                          | 175.00                            |
|    | Than Political Committees  | 0.00                          | 173.00                            |
|    | (b) Political Party Committees                                       | 0.00                          | 0.00                              |
|    | (c) Other Political Committees                                       | 0.00                          | 0.00                              |
|    | (such as PACs)   | 0.00                          | 0.00                              |
|    | (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))       | 0.00                          | 175.00                            |
|    | (444 Elico 20(4), (5), 414 (0))                                      |                               |                                   |
| 9. | Other Disbursements  | 0.00                          | 0.00                              |
| 0. | Federal Election Activity (2 U.S.C 431(20))                          |                               |                                   |
|    | (a) Shared Federal Election Activity                                 |                               |                                   |
|    | (from Schedule H6)   | 0.00                          | 0.00                              |
|    | (i) Federal Share  |                               |                                   |
|    | (ii) "Levin" Share   | 0.00                          | 0.00                              |
|    | (b) Federal Election Activity Paid Entirely                          | 0.00                          | 0.00                              |
|    | With Federal Funds   | 0.00                          | 0.00                              |
|    | (c) Total Federal Election Activity (add                             | 0.00                          | 0.00                              |
|    | Lines 30(a)(i), 30(a)(ii) and 30(b))                                 |                               |                                   |
| 1  | Total Disbursements (add Lines 21(c), 22,                            |                               |                                   |
|    | 23, 24, 25, 26, 27, 28(d), 29 and 30(c))                             | 221159.62                     | 676502.73                         |
|    | 20, 2 ·, 20, 20, 21, 20(d), 20 and 00(0)).                           |                               |                                   |
| 2. | Total Federal Disbursements  |                               |                                   |
|    | (subtract Line 21(a)(ii) and Line 30(a)(ii)                          |                               |                                   |
|    | from Line 31)  | 221159.62                     | 676502.73                         |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| Fotal Contributions (other than loans) from Line 11(d), page 3)         | 178635.23                     | 658892.83                         |
| Fotal Contribution Refunds<br>(from Line 28(d))                         | 0.00                          | 175.00                            |
| Net Contributions (other than loans) (subtract Line 34 from Line 33)    | 178635.23                     | 658717.83                         |
| Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 221159.62                     | 676327.73                         |
| Offsets to Operating Expenditures (from Line 15, page 3)                | 510.00                        | 1564.19                           |
| Net Operating Expenditures (Subtract Line 37 from Line 36)              | 220649.62                     | 674763.54                         |

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|                     | DULE A (FEC Form 3X) ZED RECEIPTS   |                      | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 6 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 11             |
|---------------------|---|----------------------|---|---|
| or for cor          | mation copied from such Reports and S<br>mmercial purposes, other than using the<br>E OF COMMITTEE (In Full)<br>RTARIAN NATIONAL COMMITTI | name and add         | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Micha               | lame (Last, First, Middle Initial) lel L. Abrams g Address 2703 Westgate St   |                      |   | Date of Receipt   |
| City<br><u>Hous</u> | ston  | State<br>TX          | Zip Code<br>77098-1413  | Transaction ID: SA11AI.22427  Amount of Each Receipt this Period                            |
|                     | ID number of contributing al political committee.   | C                    |   | 100.00  |
| Recei               | e of Employer<br>Employed<br>opt For:<br>Primary General<br>Other (specify) •   |                      | n<br>ogy Consultant<br>e Year-to-Date ▼<br>500.00                         | Contribution  |
| Arnolo              | lame (Last, First, Middle Initial)<br>d Adicoff<br>g Address 13952 Collier Rd   |                      |   | Date of Receipt  0 5 0 1 2 0 0 8  |
| City                |   | State                | Zip Code  | Transaction ID: SA11Al.22445  |
| <u>Gras</u>         | ss Valley   | CA                   | 95945-9340  | Amount of Each Receipt this Period  |
| federa              | ID number of contributing<br>al political committee.  | С                    |   | 25.00 Contribution  |
| Name<br>Self E      | e of Employer<br>Employed   | Occupation Cardiolog |   | Contribution  |
|                     | pt For: Primary General Other (specify) ♥   | Aggregate            | e Year-to-Date ▼<br>225.00  |   |
|                     | lame (Last, First, Middle Initial)  | Date of Receipt      |   |   |
| Mailin              | g Address 13952 Collier Rd  | 05 19 2008           |   |   |
| City                | na Vallav   | State<br>CA          | Zip Code  | Transaction ID: SA11AI.22446  |
| FEC                 | ss Valley  ID number of contributing al political committee.  | C                    | 95945-9340  | Amount of Each Receipt this Period  75.00   |
| Name<br>Self E      | of Employer<br>Employed   | Contribution         |   |   |
|                     | pt For: Primary General Other (specify) ▼   | Aggregate            | e Year-to-Date ▼ 300.00   |   |
| SUBTO               | TAL of Receipts This Page (optional)  | 1                    |   | 200.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                         | FOR LINE NUMBER: PAGE 7 / 183 (check only one)    X |
|---|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | Statements may not be sold or used by any pers e name and address of any political committee to |   |
| Full Name (Last, First, Middle Initial) Sally Amezcua Mailing Address PO Box 1094  City Jamul  FEC ID number of contributing federal political committee.  Name of Employer Information Requested | State Zip Code CA 91935-1094  C   | Date of Receipt    M M M                            |
| Receipt For: Primary General Other (specify)  | Information Requested  Aggregate Year-to-Date ▼  230.00   |   |
| Full Name (Last, First, Middle Initial) Sally Amezcua Mailing Address PO Box 1094   |   | Date of Receipt  05 13 2008                         |
| City  | State Zip Code  | Transaction ID: SA11AI.22494                        |
| Jamul   | CA 91935-1094   | Amount of Each Receipt this Period                  |
| FEC ID number of contributing federal political committee.  | C   | 100.00  Contribution                                |
| Name of Employer<br>Information Requested   | Occupation Information Requested  | GOTHI ISSUELI                                       |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 330.00   |   |
| Full Name (Last, First, Middle Initial) Brooke Anderson   |   | Date of Receipt                                     |
| Mailing Address 9134 134th Ct NE  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |   |
| City  | State Zip Code  | Transaction ID: SA11AI.22499                        |
| Redmond FEC ID number of contributing federal political committee.  | WA 98052-6436   | Amount of Each Receipt this Period 50.00            |
| Name of Employer<br>CombiMatrix Corp  | Occupation VP   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼  250.00  |   |
| SUBTOTAL of Receipts This Page (optional)   |   | 180.00  |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full) LIBERTARIAN NATIONAL COMMITTEE  Full Name (Last, First, Middle Initial) Donals Notron Anderson  Malling Address 1885 Craigs Store Rd  City State Zip Code Afton VA 22920.2013  FEC ID number of contributing federal political committee.  Cuprimary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Douglas J. Anderson  Malling Address 380 S Quall St  City State Zip Code Lakewood CO 80222-2534  FEC ID number of contributing federal political committee.  Contribution  Date of Receipt  Transaction ID: SA11AL 22500  Contribution  Date of Receipt  Transaction ID: SA11AL 22501  Amount of Each Receipt this Period  Federal political committee.  Co 80222-2534  FEC ID number of contributing federal political committee.  Contribution  Full Name (Last, First, Middle Initial) Cupus State Zip Code Differ (specify) ▼  Full Name (Last, First, Middle Initial) Cupus State Zip Code Differ (specify) ▼  Full Name (Last, First, Middle Initial) City State Zip Code Differ (specify) ▼  Full Name (Last, First, Middle Initial) City State Zip Code Differ (specify) ▼  Full Name (Last, First, Middle Initial) City State Zip Code MD 20715-2821  FEC ID number of contributing federal political committee.  Contribution  Contribution  Sold of Receipt Transaction ID: SA11AL 22511  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Contribution  Sold of Receipt Transaction ID: SA11AL 22511  Amount of Each Receipt this Period  Contribution  Contribution | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page              | FOR LINE NUMBER: PAGE 8 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17          |
|---|--|--|--|
| Date of Receipt    Date of Receipt  | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)   | e name and address of any political committee to                                     | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Douglas J. Anderson  Mailing Address 380 S Quail St  City State Zip Code CO 80226-2534  FEC ID number of contributing federal political committee.  Name of Employer City of Lakewood Councilman  Receipt For: Primary General Other (specify) ▼ State Zip Code Councilman  Receipt For: Primary General Other (specify) ▼ State Zip Code MD 20715-2821  FEC ID number of contributing federal political committee.  Date of Receipt Transaction ID: SA11AI.22501  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt Transaction ID: SA11AI.22501  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Ruth S. Andrasco  Mailing Address 2410 Kegwood Ln  City State Zip Code MD 20715-2821  FEC ID number of contributing federal political committee.  C Solution  Name of Employer Dr. Ronald Sroka  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00   | Donald Norton Anderson  Mailing Address 1885 Craigs Store Rd  City  Afton  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General | VA 22920-2013  C  Occupation Information Requested  Aggregate Year-to-Date ▼  275.00 | Transaction ID: SA11AI.22500  Amount of Each Receipt this Period  25.00                  |
| Mailing Address 2410 Kegwood Ln  City  State Zip Code  MD 20715-2821  FEC ID number of contributing federal political committee.  Name of Employer Dr. Ronald Sroka  Receipt For:  Primary General Other (specify) ▼  Date of Receipt  M M M D 2 D D D D D D D D D D D D D D D  | Douglas J. Anderson  Mailing Address 380 S Quail St  City  Lakewood  FEC ID number of contributing federal political committee.  Name of Employer City of Lakewood  Receipt For:  Primary General            | CO 80226-2534  C Occupation Councilman  Aggregate Year-to-Date                       | Transaction ID: SA11AI.22501  Amount of Each Receipt this Period  30.00                  |
| SUBTOTAL of Receipts This Page (optional)   | Ruth S. Andrasco  Mailing Address 2410 Kegwood Ln  City  Bowie  FEC ID number of contributing federal political committee.  Name of Employer Dr. Ronald Sroka  Receipt For:  Primary General                 | MD 20715-2821  C  Occupation Medical Reception  Aggregate Year-to-Date ▼             | Transaction ID: SA11AI.22511  Amount of Each Receipt this Period  50.00                  |
|   | SUBTOTAL of Receipts This Page (optional)  | · · · · · · · · · · · · · · · · · · ·  | 105.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |                           | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 1              |  |
|---|---------------------------|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE | ne name and addi          | not be sold or used by any pers<br>ress of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |  |
| Full Name (Last, First, Middle Initial)  Mett B. Ausley  Mailing Address 3412 Waccamaw Sho  | ores Rd                   |   | Date of Receipt  0 5 0 1 2 0 0 8  |  |
| City  | State                     | Zip Code  | Transaction ID: SA11AI.22566  |  |
| Lake Waccamaw   | NC                        | 28450-9442  | Amount of Each Receipt this Period  |  |
| FEC ID number of contributing federal political committee.  | C                         |   | 300.00  |  |
| Name of Employer<br>Cypress Pathology   | Occupation Physician      |   | Contribution  |  |
| Receipt For:  Primary General  Other (specify) ▼  | <del>-  </del>            | Year-to-Date ▼<br>1500.00   |   |  |
| Full Name (Last, First, Middle Initial) Jeff Austin   | Jeff Austin               |   |   |  |
| Mailing Address 1167 Miranda Ln   |                           |   | 05 16 2008  |  |
| City  | State                     | Zip Code  | Transaction ID: SA11Al.22568  |  |
| Kissimmee  FEC ID number of contributing federal political committee.   | FL C                      | 34741-0763  | Amount of Each Receipt this Period  1000.00  Contribution                                   |  |
| Name of Employer<br>Information Requested   | Occupation<br>Information | on Requested  | Contribution  |  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                 | Year-to-Date ▼<br>1000.00   |   |  |
| Full Name (Last, First, Middle Initial)<br>Richard O. Ayres   |                           |   | Date of Receipt   |  |
| Mailing Address 1311 Brentwood Ter  |                           |   |   |  |
| City  | State                     | Zip Code  | Transaction ID: SA11AI.22576  |  |
| Eau Claire  | WI                        | 54703-1994  | Amount of Each Receipt this Period  |  |
| FEC ID number of contributing federal political committee.  | C                         |   | 60.00   |  |
| Name of Employer<br>Silican Graphics, Inc.  | Occupation<br>Engineer    |   | Contribution  |  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                 | Year-to-Date ▼ 300.00   |   |  |
|   | 1                         |   | 1360.00   |  |

| ITEMIZED RE                                  | (FEC Form 3X)<br>CEIPTS      |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 10 / 183   (check only one)                                       |
|--|------------------------------|---|---|---|
| Any information copie                        | ed from such Reports and S   | tatements may                               | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COM                                  | · · ·                        |   |   |   |
| Full Name (Last,<br>Ken Bacon                | First, Middle Initial)       |   |   | Date of Receipt   |
| Mailing Address                              | 18 Pinewood Ln               | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |   |   |
| City   |                              | State                                       | Zip Code  | Transaction ID: SA11AI.22585  |
| Novato FEC ID number of federal political co |                              | CA  | 94947-5311  | Amount of Each Receipt this Period  50.00   |
| Name of Employer<br>Information Requ         | r<br>ested                   | Occupation                                  | n<br>on Requested   | Contribution  |
| Receipt For: Primary Other (spec             | General ify) ▼               |   | e Year-to-Date ▼<br>250.00  |   |
| Full Name (Last,<br>Alvin C. Bailey          | First, Middle Initial)       |   |   | Date of Receipt   |
| Mailing Address PO Box 611                   |                              |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Auburn                               |                              | State<br>AL                                 | Zip Code<br>36831-0611  | Transaction ID: SA11AI.22590  Amount of Each Receipt this Period                          |
| FEC ID number of federal political co        |                              | C   |   | 50.00   |
| Name of Employe<br>Information Requ          | r<br>ested                   | Occupation                                  | n<br>on Requested   | Contribution  |
| Receipt For: Primary Other (spec             | General <b>(Fig. 1988) ▼</b> | . '   | Year-to-Date ▼<br>250.00  |   |
| Full Name (Last,<br>Alvin C. Bailey          | First, Middle Initial)       |   |   | Date of Receipt   |
| Mailing Address                              | PO Box 611                   |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Auburn                               |                              | State<br>AL                                 | Zip Code  | Transaction ID: SA11AI.22591  |
| FEC ID number of federal political co        |                              | C   | 36831-0611  | Amount of Each Receipt this Period  500.00  |
| Name of Employe<br>Information Requ          | r<br>ested                   | Occupation                                  | n<br>on Requested   | Contribution  |
| Receipt For: Primary Other (spec             | General <b>▼</b>             |   | e Year-to-Date ▼ 750.00   |   |
| CURTOTAL of Doo                              | eipts This Page (optional)   | <u>I</u>                                    |   | 600.00  |

|             | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  |   | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 11 / 183 (check only one)    X  |
|-------------|--|---|--|---|
| \<br>\<br>\ | Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and ad                               | y not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|             | LIBERTARIAN NATIONAL COMMITT   | EE  |  |   |
| Α.          | Full Name (Last, First, Middle Initial)<br>Loren L. Baker  |   |  | Date of Receipt   |
|             | Mailing Address 1801 Rimrock Rd Apt  | 106   |  | 05 19 2008  |
|             | City   | State<br>CA                                 | Zip Code   | Transaction ID: SA11AI.22613  |
|             | Barstow FEC ID number of contributing federal political committee.   | C   | 92311-5707   | Amount of Each Receipt this Period  30.00   |
|             | Name of Employer<br>Information Requested  | Occupatio                                   | n<br>ion Requested   | Contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼   |   | e Year-to-Date ▼ 210.00  |   |
| —<br>В.     | Full Name (Last, First, Middle Initial) Alan D. Bannister  | Date of Receipt                             |  |   |
|             | Mailing Address 1340 Creekwood Cv  |   |  | 05 01 2008  |
|             | City   | State                                       | Zip Code   | Transaction ID: SA11AI.22634  |
|             | Lawrenceville FEC ID number of contributing federal political committee.   | GA  | 30045-7100   | Amount of Each Receipt this Period  75.00   |
|             | Name of Employer<br>Self Employed  | Occupation Poker Pl                         |  | Contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼   | <del>, '</del>                              | e Year-to-Date ▼ 375.00  |   |
| _<br>C.     | Full Name (Last, First, Middle Initial) Chris Batchelor  |   |  | Date of Receipt   |
| -           | Mailing Address 1276 Creek Bend Rd   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |   |
|             | City   | State                                       | Zip Code   | Transaction ID: SA11AI.22675  |
|             | Jacksonville FEC ID number of contributing federal political committee.  | C C   | 32259-2923   | Amount of Each Receipt this Period  50.00   |
|             | Name of Employer<br>AT&T   | Name of Employer Occupation AT&T Manager    |  |   |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                                   | e Year-to-Date ▼<br>250.00   |   |
|             | SUBTOTAL of Receipts This Page (optional)  |   |  | 155.00  |
| 卜           | TOTAL This Period (last page this line number  |   |  |   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                          | FOR LINE NUMBER: PAGE 12 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16              |
|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Peter Beary Mailing Address 433 Upstream St  City New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self-employed | State Zip Code LA 70123-2835  C Occupation   | Date of Receipt    M M  |
| Receipt For:  Primary General  Other (specify) ▼  | Writer/activist  Aggregate Year-to-Date ▼  675.00  |   |
| Full Name (Last, First, Middle Initial) Peter Beary  Mailing Address 433 Upstream St  |  | Date of Receipt  Date of Receipt  2 8 2 0 0 8   |
| City  | State Zip Code   | Transaction ID: SA11AI.22689  |
| New Orleans   | LA 70123-2835  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C  | 20.00  Contribution   |
| Name of Employer<br>Self-employed   | Occupation Writer/activist   |   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 695.00  |   |
| Full Name (Last, First, Middle Initial)<br>Robert C. W. Benedict  |  | Date of Receipt   |
| Mailing Address PO Box 41446  |  | 05 01 7 2008  |
| City  | State Zip Code   | Transaction ID: SA11AI.22713  |
| Austin  | TX 78704-0025  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C  | 50.00   |
| Name of Employer<br>Custom Quality Marble, Inc  | Occupation Small Business Owner  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 300.00  |   |
| SUBTOTAL of Receipts This Page (optional)   |  | 320.00  |

|           | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                       | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 13 / 183 (check only one)    X             |
|-----------|---|-----------------------|---|--|
| Ar<br>or  | ry information copied from such Reports and for commercial purposes, other than using the | Statements may        | y not be sold or used by any perso<br>dress of any political committee to     |  |
| $\rangle$ | NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMIT                                | TEE                   |   |  |
|           | Full Name (Last, First, Middle Initial)<br>Robert C. W. Benedict                          |                       |   | Date of Receipt  |
|           | Mailing Address PO Box 41446  | Chata                 | 7'o Code  | 05 20 2008   |
|           | City<br>Austin  | State<br>TX           | Zip Code<br>78704-0025  | Transaction ID: SA11AI.22714  Amount of Each Receipt this Period |
|           | FEC ID number of contributing federal political committee.                                | C                     | 70704 0023  | 25.00  |
|           | Name of Employer<br>Custom Quality Marble, Inc  | Occupatio<br>Small Bu | n<br>Isiness Owner  | Contribution   |
|           | Receipt For:  Primary General  Other (specify) ▼  | <del></del>           | e Year-to-Date ▼ 325.00   |  |
|           | Full Name (Last, First, Middle Initial) Robert C. W. Benedict                             |                       |   | Date of Receipt  |
|           | Mailing Address PO Box 41446  |                       |   | 05 29 2008   |
|           | City  | State                 | Zip Code  | Transaction ID: SA11AI.22715                                     |
|           | Austin  | TX                    | 78704-0025  | Amount of Each Receipt this Period                               |
|           | FEC ID number of contributing federal political committee.                                | C                     |   | 500.00  Contribution   |
|           | Name of Employer<br>Custom Quality Marble, Inc  | Occupatio<br>Small Bu | n<br>ısiness Owner  | Contribution   |
|           | Receipt For:  Primary  General  | Aggregate             | e Year-to-Date ▼  |  |
|           | Other (specify) ▼   |                       | 825.00  |  |
|           | Full Name (Last, First, Middle Initial) Arthur Bernard Benson                             |                       |   | Date of Receipt  |
|           | Mailing Address 14103 Double Pine D   | )r                    |   | 05 27 2008   |
|           | City  | State                 | Zip Code  | Transaction ID: SA11AI.22724                                     |
|           | Houston   | TX                    | 77015-1627  | Amount of Each Receipt this Period                               |
|           | FEC ID number of contributing federal political committee.                                | С                     |   | 200.00  Contribution   |
|           | Name of Employer Retired Occupation Retired Physician                                     |                       |   | Contribution   |
|           | Receipt For:  | Aggregate             | e Year-to-Date ▼  | ,  |
|           | Primary General Other (specify) ▼   |                       | 850.00  |  |
| _         | UBTOTAL of Receipts This Page (optional)  | 1                     |   | 725.00   |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | for each c   | rate schedule(s)<br>category of the<br>Summary Page | FOR LINE NUMBER: PAGE 14 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 11 |
|--|--|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | he name and address of any p   | or used by any perso<br>political committee to      | n for the purpose of soliciting contributions                                     |
| Full Name (Last, First, Middle Initial) Scott Benson  Mailing Address 609 Parnel Rd  City Old Hickory  FEC ID number of contributing federal political committee.  Name of Employer NW Airlines  Receipt For: Primary General Other (specify)          | State Zip Cod TN 37138-1  C  Occupation Pilot  Aggregate Year-to-Date              | 1016  | Date of Receipt  M M M / D D / Y Y Y Y Y  O 5                                     |
| Full Name (Last, First, Middle Initial) John Alan Berkley Mailing Address PO Box 511  City Stockton  FEC ID number of contributing federal political committee.  Name of Employer Stockton National Bank  Receipt For: Primary General Other (specify) | State Zip Code KS 67669-0  C  Occupation Banking  Aggregate Year-to-Date           | 0511  | Date of Receipt    M M M  |
| Full Name (Last, First, Middle Initial) James A. Birchfield Mailing Address 11245 Park Central  City Dallas  FEC ID number of contributing federal political committee.  Name of Employer FAA  Receipt For: Primary General Other (specify)            | State Zip Code TX 75230-3  C  Occupation Air Traffic Cont.  Aggregate Year-to-Date | 3353  | Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
| SUBTOTAL of Receipts This Page (optional)  |  | ·····   | 340.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | Use separate s<br>for each categor<br>Detailed Sumn    | ory of the  |
|--|--|---|
| Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMI | the name and address of any polition                   | sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Ronda Birr Mailing Address 248 Saddle Ln   |  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City<br>Floresville  | State         Zip Code           TX         78114-4508 | Transaction ID: SA11AI.22765  |
| FEC ID number of contributing federal political committee.   | C  | 100.00 Contribution   |
| Name of Employer Abbott Labs  Receipt For:  Primary General  Other (specify) ▼   | Occupation Financial Analyst  Aggregate Year-to-Date   | 300.00  |
| Full Name (Last, First, Middle Initial) Barry B. Bishop Mailing Address 541 Hamilton St  |  | Date of Receipt    M  |
| Apt D City   | State Zip Code   | Transaction ID: SA11Al.22767  |
| Costa Mesa   | CA 92627-8507  |   |
| FEC ID number of contributing federal political committee.   | C  | 35.00   |
| Name of Employer<br>AT-Tech  | Occupation<br>Technician                               | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼                               | 425.00  |
| Full Name (Last, First, Middle Initial) Barry B. Bishop Mailing Address 541 Hamilton St  | 1  | Date of Receipt   |
| Apt D City   | State Zip Code   | 0 5 0 6 2 0 0 8 Transaction ID: SA11AI.22768  |
| Costa Mesa   | CA 92627-8507  |   |
| FEC ID number of contributing federal political committee.   | C  | 100.00  |
| Name of Employer<br>AT-Tech  | Occupation<br>Technician                               | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼                               | 525.00  |
| SUBTOTAL of Receipts This Page (optiona  | )  | 235.00  |

|  | LE A (FEC Form 3X) D RECEIPTS  |                      | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 16 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 11            |
|--|--|----------------------|---|---|
| or for commercial NAME OF                      | n copied from such Reports and S<br>cial purposes, other than using the<br>COMMITTEE (In Full)<br>RIAN NATIONAL COMMITTE | name and add         | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Mailing Add  City  Easley                      | <u> </u>   | State<br>SC          | Zip Code<br>29642-3343  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Name of Elinformation  Receipt Fo              | mployer<br>n Requested   |                      | n<br>on Requested<br>e Year-to-Date ▼                                     | Contribution  |
| Douglas C. Mailing Add City Bangor             | dress 828 Broadway   | State<br>PA          | Zip Code<br>18013-2320  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Name of En AT&T  Receipt Fo                    | r:   | . '                  | n<br>er Engineer<br>e Year-to-Date ▼                                      | - Contribution  |
| Dwayne S.  Mailing Add  City  Cody  FEC ID nui | dress 832 19th St  | State<br>WY          | Zip Code<br>82414-3839  | Date of Receipt    M M  |
| Name of El Information Receipt Fo              |  | Occupation Informati | n non Requested  • Year-to-Date ▼  220.00                                 | Contribution  |
| SUBTOTAL                                       | of Receipts This Page (optional)   |                      | <b>)</b>  | 110.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                            | FOR LINE NUMBER: PAGE 17 / 183 (check only one)    X                     |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | d Statements may not be sold or used by any per<br>the name and address of any political committee | son for the purpose of soliciting contributions                          |
| Full Name (Last, First, Middle Initial) Rev. Fil Boston  Mailing Address 917 N 16th St  |  | Date of Receipt  |
| City  Murray  FEC ID number of contributing   | State Zip Code<br>KY 42071-1523  | Transaction ID: SA11AI.22842  Amount of Each Receipt this Period  200.00 |
| Receipt For:  Primary  Other (specify)  | Occupation Information Requested  Aggregate Year-to-Date ▼  300.00                                 | Contribution   |
| Full Name (Last, First, Middle Initial) John M. Bowers Mailing Address 9418 Flanders St NE  |  | Date of Receipt    M   |
| City  Minneapolis  FEC ID number of contributing federal political committee.   | State Zip Code MN 55449-5638   | Transaction ID: SA11AI.22855  Amount of Each Receipt this Period  60.00  |
| Name of Employer Wells Fargo & Co  Receipt For:  Primary General  Other (specify) ▼   | Occupation Senior Counsel  Aggregate Year-to-Date ▼  220.00  | Contribution   |
| Full Name (Last, First, Middle Initial) John M. Bowers  Mailing Address 9418 Flanders St NE   |  | Date of Receipt  |
| City Minneapolis  | State Zip Code MN 55449-5638   | Transaction ID: SA11AI.22856  Amount of Each Receipt this Period         |
| FEC ID number of contributing federal political committee.  | C  | 300.00   |
| Name of Employer<br>Wells Fargo & Co<br>Receipt For:  | Occupation Senior Counsel  Aggregate Year-to-Date ▼  | Contribution   |
| Primary General Other (specify) ▼   | Aggregate Year-to-Date ¥   |  |
| SUBTOTAL of Receipts This Page (optional)   | 1  | 560.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |                                | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 18 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 1            |
|---|--------------------------------|--|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT   | e name and add                 | y not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions a solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Judy Bowers  Mailing Address 9418 Flanders St NE  City Minneapolis  FEC ID number of contributing federal political committee.  Name of Employer Childrens Health Care of Minnesota | State MN C Occupatio Registere | ed Nurse   | Date of Receipt    M M M  |
| Receipt For: Primary General Other (specify)  | Aggregate                      | e Year-to-Date ▼ 225.00  |   |
| Full Name (Last, First, Middle Initial) Sheila Bowers  Mailing Address 4313 Lake Shore Dr   |                                |  | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                            |
| City  | State                          | Zip Code   | Transaction ID: SA11AI.22859  |
| Okoboji   | IA                             | 51355-2589   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  Name of Employer  | Occupatio                      | n  | 250.00  Contribution  |
| Retired   | Retired                        | 11   |   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                      | e Year-to-Date ▼<br>250.00   |   |
| Full Name (Last, First, Middle Initial)<br>Frank J. Bowman  |                                |  | Date of Receipt   |
| Mailing Address PO Box 6324   |                                |  | 05 01 YYYY<br>2008  |
| City  | State                          | Zip Code   | Transaction ID: SA11AI.22867  |
| Laguna Niguel   | CA                             | 92607-6324   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C                              |  | 50.00   |
| Name of Employer<br>Retired   | Occupatio<br>Retired           | n  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                      | e Year-to-Date ▼ 320.00  |   |
| SUBTOTAL of Receipts This Page (optional)   |                                |  | 500.00  |

|            | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS  |                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 19 / 183 (check only one)    X  |
|------------|---|------------------------------------|---|---|
| A          | ny information copied from such Reports and S<br>r for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITT   | e name and add                     | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| <b>∠</b> . | Full Name (Last, First, Middle Initial) Justin Boyd  Mailing Address 23628 81st PI  City Salem  | State<br>WI                        | Zip Code<br>53168-9197  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
|            | FEC ID number of contributing federal political committee.  Name of Employer Unemployed  Receipt For:  Primary General Other (specify)  | Occupation<br>Unemplo<br>Aggregate |   | Contribution  |
| 3.         | Full Name (Last, First, Middle Initial) Robert G. Boyd  Mailing Address 21025 Victor Street Apartment 6  City Torrance  FEC ID number of contributing federal political committee.  Name of Employer Northrop-Grumman  Receipt For: Primary General Other (specify) |                                    | Zip Code 90503-2859  n Engineer Year-to-Date 250.00                           | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                            |
| <br>:.     | Full Name (Last, First, Middle Initial) Scott Briggs  Mailing Address 7881 Paul Revere Dr  City  Jacksonville  FEC ID number of contributing federal political committee.  Name of Employer EMC Corporation  Receipt For:  Primary General Other (specify)          |                                    | Zip Code 32208-2824  n on Security Consultant Year-to-Date  250.00            | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
|            | SUBTOTAL of Receipts This Page (optional)   |                                    |   | 600.00  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Reports a               | for each category of the Detailed Summary Page     | FOR LINE NUMBER: PAGE 20 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 1 |
|---|--|---|
| or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMM | the name and address of any political committee to | solicit contributions from such committee.                                      |
| Full Name (Last, First, Middle Initial) Richard Bronstein   |  | Date of Receipt   |
| Mailing Address 6220 Enfield Ave  |  | M M / D D / Y Y Y Y Y Y O S O S O S O S O S O S O S                             |
| City  | State Zip Code                                     | Transaction ID: SA11AI.22938  |
| Encino  | CA 91316-7106                                      | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C  | 250.00  |
| Name of Employer<br>Green Sky Insurance Servi-  | Occupation<br>Owner                                | Contribution  |
| ces Receipt For:  | Aggregate Year-to-Date ▼                           |   |
| Primary General Other (specify) ▼   | 500.00   |   |
| Full Name (Last, First, Middle Initial) Todd Brown  |  | Date of Receipt   |
| Mailing Address 1422 13th St  |  | M M / D D / Y Y Y Y Y Y Y O 5 2 0 2 0 0 8                                       |
| City  | State Zip Code                                     | Transaction ID: SA11Al.22971  |
| Imperial Beach  | CA 91932-3799                                      | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C  | 100.00  |
| Name of Employer<br>California-American Water<br>Co.  | Occupation Wastes Utility Management               | Contribution  |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼ 300.00                    |   |
| Full Name (Last, First, Middle Initial)<br>Torben Bruck   | <b>I</b>   | Date of Receipt   |
| Mailing Address 7200 Melody Ln Ur   | nit 15   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                     |
| City  | State Zip Code                                     | Transaction ID: SA11AI.22972  |
| <u>La Mesa</u>  | CA 91942-1405                                      | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C  | 100.00  |
| Name of Employer<br>Stratagene Cloning Systems  | Occupation Biochemical Engineers                   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 500.00                    |   |
| SUBTOTAL of Receipts This Page (optional  | (le  | 450.00  |

TOTAL This Period (last page this line number only) .....

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS                              | Use separate schedule(s) for each category of the Detailed Summary Page                            | FOR LINE NUMBER: PAGE 21 / 183 (check only one)    X                     |
|--|--|--|
| NAME OF COMMITTEE (In Full)  | d Statements may not be sold or used by any persibe name and address of any political committee to |  |
| Full Name (Last, First, Middle Initial)                                | TEE  |  |
| C. S. Burgess  Mailing Address 132 Ridley Cir                          |  | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y |
| City<br><u>Decatur</u>   | State Zip Code GA 30030-1117   | Transaction ID: SA11AI.23004  Amount of Each Receipt this Period         |
| FEC ID number of contributing federal political committee.             | C  | 50.00  |
| Name of Employer<br>Retired  | Occupation Retired   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼                       | Aggregate Year-to-Date ▼  275.00   |  |
| Full Name (Last, First, Middle Initial) James Burns                    |  | Date of Receipt  |
| Mailing Address 4408 Fern Ave  |  | 05 27 YYYY<br>2008   |
| City   | State Zip Code   | Transaction ID: SA11AI.23019   |
| Shreveport  FEC ID number of contributing federal political committee. | LA 71105-3104  | Amount of Each Receipt this Period  500.00                               |
| Name of Employer<br>Information Requested                              | Occupation Information Requested   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼                       | Aggregate Year-to-Date ▼ 500.00  |  |
| Full Name (Last, First, Middle Initial) Michael R. Burris              |  | Date of Receipt  |
| Mailing Address 1923 Ravenscroft D                                     | r  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| City<br>Austin   | State Zip Code<br>TX 78748-3423  | Transaction ID: SA11AI.23026  Amount of Each Receipt this Period         |
| FEC ID number of contributing federal political committee.             | C  | 400.00   |
| Name of Employer<br>Self-Employed                                      | Occupation Auditor   | Contribution   |
| Receipt For:  Primary  General  Other (specify)                        | Aggregate Year-to-Date ▼ 600.00  |  |
| SUBTOTAL of Receipts This Page (optional                               |  | 950.00   |

|                | DULE A (FEC Form 3X) ZED RECEIPTS                                |                        | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 22 / 183 (check only one)    X  |
|----------------|--|------------------------|--|---|
| or for co      | mmercial purposes, other than using the E OF COMMITTEE (In Full) | e name and add         | y not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| LIBE           | ERTARIAN NATIONAL COMMITTI                                       | EE                     |  |   |
| Walla          | lame (Last, First, Middle Initial)<br>ce Howard Burton           |                        |  | Date of Receipt   |
| Mailir<br>———  | ng Address 213 S 4th St  |                        |  | 05 01 7 2008  |
| City           | 110  | State<br>MO            | Zip Code   | Transaction ID: SA11AI.23028  |
|                | us  ID number of contributing al political committee.            | C                      | 63028-2210   | Amount of Each Receipt this Period 50.00  |
| Name<br>Retire | of Employer<br>ed  | Occupatio<br>Retired   | n  | Contribution  |
| Rece           | ipt For: Primary General Other (specify) ▼                       | Aggregate              | e Year-to-Date ▼<br>350.00   |   |
| B. Walla       | lame (Last, First, Middle Initial)<br>ce Howard Burton           | 1                      |  | Date of Receipt   |
| Mailir         | ng Address 213 S 4th St  |                        |  | 05 13 2008  |
| City           |  | State                  | Zip Code   | Transaction ID: SA11AI.23029  |
|                | us  ID number of contributing al political committee.            | C                      | 63028-2210   | Amount of Each Receipt this Period  100.00  |
|                | of Employer  | Occupatio<br>Retired   | n  | Contribution  |
| Rece           | ipt For: Primary General Other (specify) ▼                       |                        | e Year-to-Date ▼<br>450.00   |   |
|                | lame (Last, First, Middle Initial)<br>V. Callahan                |                        |  | Date of Receipt   |
| Mailir         | ng Address 41 Basswood Dr  |                        |  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City           |  | State                  | Zip Code   | Transaction ID: SA11AI.23062  |
|                | on  ID number of contributing al political committee.            | C                      | 19943-6106   | Amount of Each Receipt this Period 41.67  |
| Name<br>Inform | e of Employer<br>nation Requested                                | Occupatio<br>Informati | n<br>ion Requested   | Contribution  |
| Rece           | ipt For: Primary General Other (specify) ▼                       | <del>, '</del>         | e Year-to-Date ▼ 208.35  |   |
| SURTO          | TAL of Receipts This Page (optional)                             | 1                      |  | 191.67  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |                        | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 23 / 183 (check only one)    X             |
|---|------------------------|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE (In Full) | ne name and add        | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions                   |
| Full Name (Last, First, Middle Initial) James C. Casterline  Mailing Address PO Box 2484  |                        |   | Date of Receipt  |
| City  Gearhart  FEC ID number of contributing   | State<br>OR            | Zip Code<br>97138-2484  | Transaction ID: SA11AI.23116  Amount of Each Receipt this Period |
| Name of Employer Pacific Title Company  | Occupatio<br>Manager   |   | — Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 525.00   | ]  |
| Full Name (Last, First, Middle Initial) Allen E. Chantelois Mailing Address 5555 N Meade St   | •                      |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City Appleton   | State<br>WI            | Zip Code<br>54913-8382  | Transaction ID: SA11AI.23138  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      | 34310 000E  | 100.00   |
| Name of Employer<br>CHN   | Occupatio<br>Physicial |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 400.00   |  |
| Full Name (Last, First, Middle Initial)<br>Allen E. Chantelois  |                        |   | Date of Receipt  |
| Mailing Address 5555 N Meade St   |                        |   | 05 13 7 2008   |
| City<br><u>Appleton</u>   | State<br>WI            | Zip Code<br>54913-8382  | Transaction ID: SA11AI.23139  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      |   | 500.00   |
| Name of Employer<br>CHN   | Occupatio<br>Physicial | n   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 900.00   |  |
| SUBTOTAL of Receipts This Page (optional)   | •                      |   | 625.00   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | <b>K</b> )            | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 24 / 183 (check only one)    X         |
|--|-----------------------|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMI | the name and add      | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions               |
| Full Name (Last, First, Middle Initial) Michael C. Colley Mailing Address 444 Magnolia Dr  City  | State                 | Zip Code  | Date of Receipt    M M                                       |
| Gulf Shores  FEC ID number of contributing federal political committee.  | C                     | 36542-4408  | Amount of Each Receipt this Period  150.00                   |
| Name of Employer Retired (U.S. Navy)  Receipt For:  Primary General Other (specify) ▼  |                       | n<br>niral, Ret.<br>e Year-to-Date ▼<br>900.00                            | Contribution   |
| Full Name (Last, First, Middle Initial) Michael C. Colley Mailing Address 444 Magnolia Dr  | •                     |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City   | State                 | Zip Code  | Transaction ID: SA11AI.23207                                 |
| Gulf Shores  FEC ID number of contributing federal political committee.  | C                     | 36542-4408  | Amount of Each Receipt this Period  700.00                   |
| Name of Employer<br>Retired (U.S. Navy)  |                       | n<br>niral, Ret.<br>e Year-to-Date ▼                                      | Contribution   |
| Primary General Other (specify) ▼  | Aggregate             | 1600.00   |  |
| Full Name (Last, First, Middle Initial) Michael C. Colley  | l                     |   | Date of Receipt  |
| Mailing Address 444 Magnolia Dr  |                       |   | 05 29 2008   |
| City   | State                 | Zip Code  | Transaction ID: SA11AI.23208                                 |
| Gulf Shores  FEC ID number of contributing federal political committee.  | C                     | 36542-4408  | Amount of Each Receipt this Period  375.00                   |
| Name of Employer<br>Retired (U.S. Navy)  | Occupatio<br>Vice Adn | n<br>niral, Ret.  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate             | e Year-to-Date ▼<br>1975.00   |  |
| SUBTOTAL of Receipts This Page (optional   | al)                   | <b>_</b>  | 1225.00  |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  LIBERTARIAN NATIONAL COMMITTEE  Full Name (tast, First, Middle Initial)  William Charles Golins  Maling Address 505 Mallory Court  City  State Zip Code  El Paso TX 79912-4228  FEC ID number of contributing federal political committee.  Contribution  Full Name (Last, First, Middle Initial)  Curis A Cock  Malling Address 19051 86th Ave NE  City  State Zip Code  Bottlell WA 98011-2111  FEC ID number of contributing federal political committee.  Contribution  Date of Receipt  Contribution  Date of Receipt  Contribution  Date of Receipt  Contribution  Date of Receipt  Contribution  Contribution  Date of Receipt  Contribution  Date of Receipt  Contribution  Date of Receipt  Transaction ID: SA11A1.23233  Amount of Each Receipt his Period  Contribution  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Contribution  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.23255  Amount of Each Receipt his Period  Transac | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page              | FOR LINE NUMBER: PAGE 25 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
|---|---|--|--|
| Mailing Address 505 Mallory Court  City State Zip Code TX 79912-4228  FEC ID number of contributing federal political committee.  City State Zip Code Hospital Administrator Hospital Administrator Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Curis & Cocupation Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Curis & Cocupation Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Curis & Cock  Mailing Address 19051 86th Ave NE  City State Zip Code WA 98011-2111  FEC ID number of contributing federal political committee.  Name of Employer Dave Winght Termaine LLP Technician Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Cocupation Primary General Other Specific Specify ▼  Full Name (Last, First, Middle Initial) Cocupation Technician Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Cocupation Technician Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Cocupation State Zip Code CA 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing federal political committee.  Can 90046-1410  FEC ID number of contributing feder | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  | e name and address of any political committee to                                     | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Curis A Cook  Mailing Address 19051 86th Ave NE  City State Zip Code WA 98011-2111  FEC ID number of contributing federal political committee.  Name of Employer Davis Wright Tremaine LLP  Full Name (Last, First, Middle Initial) Don Cowles  Mailing Address 2437 Green View PI  City State Zip Code WA 98011-2111  Coccupation Technician  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: SA11Al.23233  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11Al.23233  Amount of Each Receipt this Period  Contribution  Date of Receipt  Transaction ID: SA11Al.23233  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.23265  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  Name of Employer Cowles, Sabol & Co Inc  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Stockbrocker  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Stockbrocker  Aggregate Year-to-Date ▼   | William Charles Collins  Mailing Address 505 Mallory Court  City El Paso  FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General        | TX 79912-4228  C Occupation Hospital Administrator Aggregate Year-to-Date ▼  5000.00 | Transaction ID: SA11AI.23214  Amount of Each Receipt this Period  5000.00                |
| Don Cowles  Mailing Address 2437 Green View PI  City State Zip Code Los Angeles CA 90046-1410  FEC ID number of contributing federal political committee.  Name of Employer Cowles, Sabol & Co Inc  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M / D D / 2 0 0 8  Transaction ID: SA11Al.23265  Amount of Each Receipt this Period  Coccupation Stockbrocker  Aggregate Year-to-Date ▼  Contribution  | Curtis A. Cook  Mailing Address 19051 86th Ave NE  City  Bothell  FEC ID number of contributing federal political committee.  Name of Employer Davis Wright Tremaine LLP  Receipt For:  Primary General | WA 98011-2111  C  Occupation Technician  Aggregate Year-to-Date ▼                    | Transaction ID: SA11AI.23233  Amount of Each Receipt this Period  250.00                 |
| SUBTOTAL of Receipts This Page (optional) 5334.00   | Don Cowles  Mailing Address 2437 Green View PI  City  Los Angeles  FEC ID number of contributing federal political committee.  Name of Employer Cowles, Sabol & Co Inc  Receipt For:  Primary General   | CA 90046-1410  C  Occupation Stockbrocker  Aggregate Year-to-Date ▼                  | Transaction ID: SA11AI.23265  Amount of Each Receipt this Period  84.00                  |
|   | SUBTOTAL of Receipts This Page (optional)   | · · · · · · · · · · · · · · · · · · ·  | 5334.00  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                                  | FOR LINE NUMBER: PAGE 26 / 183 (check only one)    X |
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| NAME OF COMMITTEE (In Full)  | d Statements may not be sold or used by any personant the name and address of any political committee to |  |
| LIBERTARIAN NATIONAL COMMI   | ITEE   |  |
| Full Name (Last, First, Middle Initial)  Don Cowles  Mailing Address 2437 Green View P |  | Date of Receipt                                      |
| City   | State Zip Code   | 0 5 2 8 2 0 0 8  Transaction ID: SA11AI.23266        |
| Los Angeles  | CA 90046-1410  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.                             | C  | 100.00   |
| Name of Employer<br>Cowles, Sabol & Co Inc   | Occupation<br>Stockbrocker   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼                                       | Aggregate Year-to-Date ▼ 352.00  |  |
| Full Name (Last, First, Middle Initial) Carlyle Cox                                    |  | Date of Receipt                                      |
| Mailing Address PO Box 879   |  | 05 19 YYYYY<br>2008                                  |
| City   | State Zip Code   | Transaction ID: SA11AI.23268                         |
| Foley  | AL 36536-0879  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.                             | C  | 250.00   |
| Name of Employer<br>FedEx  | Occupation Pilot   | Contribution   |
| Receipt For:   | Aggregate Year-to-Date ▼   |  |
| Primary General Other (specify) ▼  | 250.00   |  |
| Full Name (Last, First, Middle Initial)<br>Paul C. Darrow                              |  | Date of Receipt                                      |
| Mailing Address 4628 Turnerville Ro  |  | 05 19 YYYYY<br>2008                                  |
| City   | State Zip Code   | Transaction ID: SA11AI.23350                         |
| Bedford  | WY 83112-9716  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.                             | C  | 100.00   |
| Name of Employer<br>Retired  | Occupation<br>Retired  | Contribution   |
| Receipt For:   | Aggregate Year-to-Date ▼   | _  |
| Primary General Other (specify) ▼  | 300.00   |  |
|  | l)   | 450.00   |

|    | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  | for each c                                | rate schedule(s)<br>ategory of the<br>summary Page | FOR LINE NUMBER: PAGE 27 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16          |
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| An | y information copied from such Reports and S<br>for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full) | name and address of any p                 | or used by any person<br>olitical committee to s   | for the purpose of soliciting contributions solicit contributions from such committee. |
|    | LIBERTARIAN NATIONAL COMMITT   | ΞΕ<br>                                    |  |  |
| ı  | Full Name (Last, First, Middle Initial) Stephen L. Dasbach   |   |  | Date of Receipt  |
|    | Mailing Address 2803 Flagmaker Dr  |   |  | 05 28 2008   |
|    | City Falls Church  | State Zip Code VA 22042-2                 |  | Transaction ID: SA11AI.23352  Amount of Each Receipt this Period                       |
|    | FEC ID number of contributing federal political committee.   | C   | 0 0  | 1000.00  |
|    | Name of Employer<br>FCPS   | Occupation Teacher                        |  | Contribution   |
|    | Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date                    | 1060.00  |  |
|    | Full Name (Last, First, Middle Initial)<br>Paul Davis  |   |  | Date of Receipt  |
|    | Mailing Address 4508 E Camino Segur  | 05 01 2008                                |  |  |
|    | City   | State Zip Code                            |  | Transaction ID: SA11AI.23370   |
|    | Sierra Vista  FEC ID number of contributing federal political committee.   | AZ 85650-9                                | 1450   | Amount of Each Receipt this Period  50.00  |
|    | Name of Employer<br>The Davis Company  | Occupation Sales                          |  | Contribution   |
|    | Receipt For: Primary General Other (specify)   | Aggregate Year-to-Date                    | 250.00   |  |
|    | Full Name (Last, First, Middle Initial) Ronald Davis   | Date of Receipt                           |  |  |
|    | Mailing Address 8126 E Willowbrook F   | 05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |
|    | City<br>Wichita  | State Zip Code<br>KS 67207-1              |  | Transaction ID: SA11AI.23374  Amount of Each Receipt this Period                       |
|    | FEC ID number of contributing federal political committee.   | C   | 102  | 500.00   |
|    | Name of Employer<br>Self-Employed  | Occupation Physician                      |  | Contribution   |
|    | Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date                    | 500.00   |  |
|    | UBTOTAL of Receipts This Page (optional)   |   |  | 1550.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | )                     | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 28 / 183 (check only one)    X                                      |
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| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | the name and add      | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Ronald M. Davis Mailing Address 4041 Esperanza Dr   |                       |   | Date of Receipt   |
| City Sacramento FEC ID number of contributing   | State<br>CA           | Zip Code<br>95864-3069  | Transaction ID: SA11AI.23375  Amount of Each Receipt this Period                          |
| federal political committee.  Name of Employer Retired  Receipt For:  | Occupation<br>Retired | n<br>• Year-to-Date ▼   | — Contribution  |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  |                       | 210.00  |   |
| Nanette Dean  Mailing Address 12842 Kedleston Cir   |                       |   | Date of Receipt  0 5 2 9 2 0 0 8  |
| City  | State                 | Zip Code  | Transaction ID: SA11AI.23388  |
| Fort Myers  | <u>FL</u>             | 33912-6603  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C                     |   | 1000.00  Contribution   |
| Name of Employer<br>Dean Steel Buildings, Inc   | Occupation Engineer   |   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | Year-to-Date ▼ 1000.00  |   |
| Full Name (Last, First, Middle Initial)<br>Elizabeth Deforest   | Date of Receipt       |   |   |
| Mailing Address 1336 Princeton St A   | 05 01 2008            |   |   |
| City  | State                 | Zip Code  | Transaction ID: SA11AI.23403  |
| Santa Monica  | CA                    | 90404-2420  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | C                     |   | 41.67  Contribution   |
| Name of Employer<br>None  | Occupation Homema     | ker   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | Year-to-Date ▼<br>308.35  | ]   |
| SUBTOTAL of Receipts This Page (optional)   |                       |   | 1101.67   |

| A. Full Name of Exercipt For Prima Other  B. Full Name of Exercipt For Prima Other  Full Name of Exercipt For Prima Other  Receipt For Prima Other  Receipt For Prima Other  Full Name of Exercipt For Prima Other  Receipt For Prima Other  Full Name of Exercipt For Prima Other  Receipt For Prima Other  Receipt For Prima Other   | cial purposes, other than using the COMMITTEE (In Full) ARIAN NATIONAL COMMITT  (Last, First, Middle Initial) Arelager  dress 8622 Plainfield Ln  ti  mber of contributing tical committee.  mployer  ary General  or (specify)   (Last, First, Middle Initial) asi dress 16 Old Rocky Point R | State OH C Occupation Retired Aggregate     | Zip Code 45236-1704  Year-to-Date ▼ 275.00   | Date of Receipt  Transaction ID: SA11Al.23451  Date of Receipt  Date of Receipt  Transaction ID: SA11Al.23416  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt  Solution  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt  Solution  Date of Receipt  Date of Receipt  Date of Receipt  Solution  Date of Receipt  Date of Receipt |
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| Full Name e Everett J. D Mailing Add  City Cincinnat FEC ID nur federal polit  Name of Er Retired  Receipt For Prima Other  B. Elaine DiMa Mailing Add  City Miller Pla FEC ID nur federal polit  Name of Er Brookhaver  Receipt For Prima Other   | (Last, First, Middle Initial) leJager dress 8622 Plainfield Ln  ti mber of contributing tical committee. mployer or: ary General or (specify)  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R  | State OH C Occupation Retired Aggregate     | 45236-1704  Year-to-Date ▼  275.00  Zip Code | Transaction ID: SA11AI.23416  Amount of Each Receipt this Period  55.00  Contribution  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Receipt For Mailing Add  City  Cincinnat  FEC ID nure federal politic Name of Errect Prima Other  Full Name  Elaine DiMar Mailing Add  City  Miller Plar FEC ID nure federal politic Name of Errect Prima Other  Name of Errect Prima Other  Receipt For Prima Other   | redager dress 8622 Plainfield Ln  ti  mber of contributing tical committee.  mployer  ary General ar (specify)  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R   | OH C Occupation Retired Aggregate Add State | 45236-1704  Year-to-Date ▼  275.00  Zip Code | Transaction ID: SA11AI.23416  Amount of Each Receipt this Period  55.00  Contribution  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City Cincinnat FEC ID nur federal polit Retired Receipt For Other  Full Name Elaine DiMa Mailing Add City Miller Pla FEC ID nur federal polit Name of Er Brookhaver Receipt For Other  | mber of contributing tical committee.  mployer  or: ary General or (specify)   (Last, First, Middle Initial) asi dress 16 Old Rocky Point R  | OH C Occupation Retired Aggregate Add State | 45236-1704  Year-to-Date ▼  275.00  Zip Code | Date of Receipt    M  |
| Cincinnat  FEC ID nur federal polir  Name of Er Retired  Receipt For Other  Full Name Elaine DiMa Mailing Add  City Miller Pla  FEC ID nur federal polir  Name of Er Brookhaver  Receipt For Other   | mber of contributing tical committee.  mployer  or: ary General or (specify) ▼  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R   | OH C Occupation Retired Aggregate Add State | 45236-1704  Year-to-Date ▼  275.00  Zip Code | Amount of Each Receipt this Period  55.00  Contribution  Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Receipt For Mailler Plate FC ID nur federal political Prima Other Full Name of Elaine Dilina Mailing Add City Miller Plate FEC ID nur federal political Prima Other Frima Other Frima Other Frima Other Federal Political Prima Other For For Prima Other Federal Political Prima Other Federal Prima Other Federa | mber of contributing tical committee.  mployer  or: ary General or (specify) ▼  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R   | Occupation Retired Aggregate Add State      | Year-to-Date ▼  275.00  Zip Code             | Date of Receipt    Date of Receipt   2008   |
| Receipt For Marke of English Receipt For Prima Other Full Name Elaine DiMa Mailing Add City Miller Pla FEC ID nur federal politication Receipt For Prima Other Receipt For Prima Other   | mployer  ir: ary General  ir (specify)   (Last, First, Middle Initial) asi dress 16 Old Rocky Point R  | Occupation Retired Aggregate Add State      | Year-to-Date ▼ 275.00  Zip Code              | Date of Receipt  0 5 0 1 2 0 0 8  Transaction ID: SA11Al.23451  |
| Full Name Elaine DiMa Mailing Add  City Miller Pla  FEC ID nur federal polir  Name of Er Brookhaver  Receipt For Prima Other   | r: ary General  r (specify) ▼  (Last, First, Middle Initial) asi  dress 16 Old Rocky Point R   | Retired Aggregate  Add State                | Year-to-Date ▼ 275.00  Zip Code              | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y  |
| Full Name Elaine DiMa Mailing Add  City Miller Pla  FEC ID nut federal politication of Ending Prima Other  | ary General or (specify) ▼  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R   | Rd State                                    | 275.00<br>Zip Code                           | 0 5 0 1 2 0 0 8<br>Transaction ID: SA11Al.23451   |
| Full Name Elaine DiMa Mailing Add City Miller Pla FEC ID nur federal polif Name of En Brookhavel Receipt For Prima Other   | r (specify)  (Last, First, Middle Initial) asi dress 16 Old Rocky Point R  | State                                       | Zip Code                                     | 0 5 0 1 2 0 0 8<br>Transaction ID: SA11Al.23451   |
| Elaine DiMa Mailing Add City Miller Pla FEC ID nur federal polir Name of Er Brookhaver Receipt For Prima Other   | dress 16 Old Rocky Point R   | State                                       | ·  | 0 5 0 1 2 0 0 8<br>Transaction ID: SA11Al.23451   |
| City Miller Pla FEC ID nur federal polir Name of Er Brookhaver Receipt Fo  |  | State                                       | ·  | 0 5 0 1 2 0 0 8  Transaction ID: SA11Al.23451   |
| Miller Pla FEC ID nur federal polir Name of Er Brookhaver Receipt For Prima  | ace  |   | ·  |   |
| FEC ID nur<br>federal politi<br>Name of Er<br>Brookhavei<br>Receipt For<br>Prima   | ace  | NY  |  |   |
| Name of En<br>Brookhavei<br>Receipt For<br>Prima   |  |   | 11764-2026                                   | Amount of Each Receipt this Period  |
| Receipt Fo   | mber of contributing tical committee.  | C   |  | 30.00  Contribution   |
| Prima  | mployer<br>n Nat'l Labs  | Occupation<br>Research                      |  | Contribution  |
| Othe   |  | Aggregate                                   | Year-to-Date ▼                               |   |
| Full Name  | ary General<br>or (specify) ♥  |   | 250.00                                       |   |
| <ul> <li>Elaine DiMa</li> </ul>  | (Last, First, Middle Initial)  | Date of Receipt                             |  |   |
| Mailing Add  | dress 16 Old Rocky Point R   | 05 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |   |
| City   |  | State                                       | Zip Code                                     | Transaction ID: SA11AI.23452  |
| Miller Pla   |  | NY  | 11764-2026                                   | Amount of Each Receipt this Period  |
|  | mber of contributing tical committee.  | C   |  | 23.50   |
| Name of Er<br>Brookhaver   | mployer<br>n Nat'l Labs  | Occupation<br>Research                      |  | Contribution  |
| Receipt Fo   |  | Aggregate                                   | Year-to-Date ▼                               |   |
| Other  | ary General<br>or (specify) ♥  | 0 0   | 273.50                                       |   |
| SUBTOTAL   |  | 1   |  | 108.50  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                          | FOR LINE NUMBER: PAGE 30 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and<br>or for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full) | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions                                |
| LIBERTARIAN NATIONAL COMMIT   | TEE  |   |
| Full Name (Last, First, Middle Initial) Patrick J. Dixon  Mailing Address 5002 Sundown St                                       |  | Date of Receipt   |
| City  | State Zip Code   | 0 5 0 1 2 0 0 8 Transaction ID: SA11Al.23460                                  |
| Lago Vista  FEC ID number of contributing   | TX 78645-6066  | Amount of Each Receipt this Period  |
| federal political committee.  | C  | 50.00 Contribution  |
| Name of Employer<br>DPAS INC  | Occupation Consultant  |   |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼  3225.00  |   |
| Full Name (Last, First, Middle Initial)<br>Patrick J. Dixon   |  | Date of Receipt   |
| Mailing Address 5002 Sundown St   |  | 05 19 2008  |
| City  | State Zip Code   | Transaction ID: SA11AI.23461  |
| Lago Vista  FEC ID number of contributing federal political committee.  | TX 78645-6066  | Amount of Each Receipt this Period  350.00                                    |
| Name of Employer<br>DPAS INC  | Occupation Consultant  | Contribution  |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼ 3575.00   |   |
| Full Name (Last, First, Middle Initial) Patrick J. Dixon  |  | Date of Receipt   |
| Mailing Address 5002 Sundown St   |  | 05 28 2008  |
| City<br>Lago Vista  | State Zip Code<br>TX 78645-6066  | Transaction ID: SA11AI.23462 Amount of Each Receipt this Period               |
| FEC ID number of contributing federal political committee.  | C  | 100.00  |
| Name of Employer<br>DPAS INC  | Occupation Consultant  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼  3675.00  |   |
| SUBTOTAL of Receipts This Page (optional)   |  | 500.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   |                               | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 31 / 183 (check only one)    X   11a                                |
|--|-------------------------------|--|---|
| Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | tatements may<br>name and ado | not be sold or used by any persol<br>lress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| LIBERTARIAN NATIONAL COMMITTE  | ΕE                            |  |   |
| Full Name (Last, First, Middle Initial) Patrick J. Dixon   |                               |  | Date of Receipt   |
| Mailing Address 5002 Sundown St  |                               |  | 05 28 YYYY<br>2008  |
| City   | State                         | Zip Code   | Transaction ID: SA11AI.23463  |
| Lago Vista   | TX                            | 78645-6066   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | С                             |  | 20.00   |
| Name of Employer<br>DPAS INC   | Occupation<br>Consultar       |  | Contribution  |
| Receipt For:   |                               | Year-to-Date ▼   |   |
| Primary General Other (specify) ▼  | riggregate                    | 3695.00  |   |
| Full Name (Last, First, Middle Initial) Jim Dodds  | l                             |  | Date of Receipt   |
| Mailing Address 4321 Summer Breeze   | 05 12 2008                    |  |   |
| City   | State                         | Zip Code   | Transaction ID: SA11AI.23470  |
| Vero Beach   | FL                            | 32967-1835   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C                             |  | 250.00  |
| Name of Employer<br>Information Requested  | Occupation<br>Information     | n<br>on Requested  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                     | Year-to-Date ▼<br>250.00   |   |
| Full Name (Last, First, Middle Initial) Neal Donner  | Date of Receipt               |  |   |
| Mailing Address 2739 S Westgate Ave  | 05 19 2008                    |  |   |
| City   | State                         | Zip Code   | Transaction ID: SA11Al.23479  |
| Los Angeles  | CA                            | 90064-3527   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C                             |  | 60.00   |
| Name of Employer<br>Information Requested  | Occupation<br>Information     | on Requested   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   |                               | Year-to-Date ▼<br>245.00   |   |
| SUBTOTAL of Receipts This Page (optional)  |                               | <b>)</b>   | 330.00  |

TOTAL This Period (last page this line number only) ......

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                          | FOR LINE NUMBER: PAGE 32 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTED   | Statements may not be sold or used by any perso e name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Bruce E. Dovner  Mailing Address 1750 Newport Ave Apt 6  City Long Beach  FEC ID number of contributing federal political committee.  Name of Employer Computer Sciences Corp  Receipt For: Primary General Other (specify)   | State Zip Code CA 90804-1923  C  Occupation Programmer/Analyst Aggregate Year-to-Date  225.00    | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                           |
| Full Name (Last, First, Middle Initial) Chad Draper  Mailing Address 5441 Wells Rd  City Woodhull  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)                           | State Zip Code NY 14898-9652  C  Occupation Bee Keeper  Aggregate Year-to-Date ▼  245.00         | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                             |
| Full Name (Last, First, Middle Initial)  Michael L. Dudley  Mailing Address 4680 E McCloy Ave  City  Port Clinton  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) | State Zip Code OH 43452-4231  C  Occupation Information Requested Aggregate Year-to-Date  250.00 | Date of Receipt    M M   |
| SUBTOTAL of Receipts This Page (optional)   | •  | 280.00   |
| TOTAL This Period (last page this line numbe  | r only)  |  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                           | FOR LINE NUMBER: PAGE 33 / 183 (check only one)    X   11a   |
|--|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  |   |  |
| Full Name (Last, First, Middle Initial)  Maurice Dunn  Mailing Address 15679 Knoll Oak Ct  City  Huntersville  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General Other (specify) | State Zip Code NC 28078-4834  C  Occupation Information Requested  Aggregate Year-to-Date  300.00 | Date of Receipt    M   M   D   D   29   2008    Transaction ID: SA11Al.23544    Amount of Each Receipt this Period   300.00    Contribution   Contribution |
| Full Name (Last, First, Middle Initial) Samuel J. Edelston  Mailing Address 34 Daffodil Ln  City Cos Cob  FEC ID number of contributing federal political committee.  Name of Employer Boardroom Inc  Receipt For: Primary General Other (specify)               | State Zip Code CT 06807-1412  C Occupation VA Aggregate Year-to-Date  250.00                      | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Full Name (Last, First, Middle Initial) Tom Elkins  Mailing Address 1305 Cordillera Trce  City Boerne  FEC ID number of contributing federal political committee.  Name of Employer Petrospect  Receipt For: Primary General Other (specify)                     | State Zip Code TX 78006-4235  C  Occupation Inspector  Aggregate Year-to-Date  350.00             | Date of Receipt    M   |
| SUBTOTAL of Receipts This Page (optional)  |   | 650.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |   | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 34 / 183 (check only one)    X   |
|---|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE (In Full)   |   | not be sold or used by any persol<br>ress of any political committee to |  |
| Full Name (Last, First, Middle Initial) Tom Elkins  Mailing Address 1305 Cordillera Trce  City Boerne  FEC ID number of contributing federal political committee.  Name of Employer Petrospect  Receipt For: Primary General Other (specify)          | State TX  C  Occupation Inspector Aggregate |   | Date of Receipt  0 5 3 0 2 0 0 8  Transaction ID: SA11AI.23588  Amount of Each Receipt this Period  125.00  Contribution       |
| Full Name (Last, First, Middle Initial) Carl G. Ellis Mailing Address 2606 W Hill Rd  City Roxbury  FEC ID number of contributing federal political committee.  Name of Employer Ethan Allen, Inc.  Receipt For: Primary General Other (specify)      | State VT  C  Occupation Watchma Aggregate   |   | Date of Receipt    M M   |
| Full Name (Last, First, Middle Initial) John P. Evans  Mailing Address 515 Lake St S Apt 305  City Kirkland  FEC ID number of contributing federal political committee.  Name of Employer Solutions, IQ  Receipt For: Primary General Other (specify) | State WA  C  Occupation Consultar Aggregate |   | Date of Receipt  M M M / D D O 2 0 0 8  Transaction ID: SA11AI.23632  Amount of Each Receipt this Period  100.00  Contribution |
| SUBTOTAL of Receipts This Page (optional)   |   |   | 725.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                | FOR LINE NUMBER: PAGE 35 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
|--|--|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  |  |   |
| Full Name (Last, First, Middle Initial) Richard Evey  Mailing Address 4150 Trim Tree Dr  City Morganton  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)            | State Zip Code NC 28655-8431  C Occupation Retired Aggregate Year-to-Date  225.00      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |
| Full Name (Last, First, Middle Initial) Gregory M. Fahy Mailing Address 880 Via Blairo  City Corona  FEC ID number of contributing federal political committee.  Name of Employer 21st Century Medicine  Receipt For:  Primary General Other (specify) | State Zip Code CA 92879-8245  C  Occupation Scientist  Aggregate Year-to-Date   375.00 | Date of Receipt    M M  |
| Full Name (Last, First, Middle Initial) John A. Fehsenfeld  Mailing Address PO Box 15567  City Las Vegas  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)           | State Zip Code NV 89114-5567  C  Occupation Retired  Aggregate Year-to-Date  250.00    | Date of Receipt    M M  |
| SUBTOTAL of Receipts This Page (optional)  |  | 375.00  |

|                 | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS  |                                     | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 36 / 183 (check only one)    X  |
|-----------------|---|-------------------------------------|---|---|
| A               | ny information copied from such Reports and S<br>r for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITT | e name and addres                   | ot be sold or used by any persons of any political committee to         | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| ∠<br><b>4</b> . | Full Name (Last, First, Middle Initial)<br>Fred Dan Fernandes   |                                     |   | Date of Receipt   |
|                 | Mailing Address 2201 Stratford Way  City  | State                               | Zip Code  | 0 5 2 8 2 0 0 8  Transaction ID: SA11AI.23676   |
|                 | La Verne FEC ID number of contributing federal political committee.   | CA                                  | 91750-5143  | Amount of Each Receipt this Period  100.00  |
|                 | Name of Employer Raytheon  Receipt For: Primary General Other (specify)   | Occupation Retired Eng Aggregate Ye | gineer ear-to-Date ▼ 300.00   | Contribution  |
|                 | Full Name (Last, First, Middle Initial)  Julian Fondren  Mailing Address 217 Cardinal Ct  |                                     |   | Date of Receipt  0 5 0 1 2 0 0 8  |
|                 | City<br>Hartsville  | State<br>SC                         | Zip Code<br>29550-2873  | Transaction ID: SA11AI.23731  Amount of Each Receipt this Period                            |
|                 | FEC ID number of contributing federal political committee.  | C                                   | 2000 2070   | 85.00   |
|                 | Name of Employer<br>United States Air Force   | Occupation<br>Military              |   | Contribution  |
|                 | Receipt For:  Primary General  Other (specify)  | Aggregate Ye                        | ear-to-Date ▼ 425.00  |   |
| _               | Full Name (Last, First, Middle Initial) Robert Ford   |                                     |   | Date of Receipt   |
|                 | Mailing Address 57 Military Dr  |                                     | 7: 0 1  | 05 01 2008  |
|                 | City<br><u>Mountain Home</u>  | State<br>AR                         | Zip Code<br>72653-5810  | Transaction ID: SA11AI.23733  Amount of Each Receipt this Period                            |
|                 | FEC ID number of contributing federal political committee.  | C                                   |   | 85.00   |
|                 | Name of Employer<br>MCAMA   | Occupation Physician                |   | Contribution  |
|                 | Receipt For:  Primary General  Other (specify) ▼  | Aggregate Ye                        | ear-to-Date ▼<br>420.00   |   |
| ſ,              | SUBTOTAL of Receipts This Page (optional)   | 1                                   |   | 270.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | .)  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only one)    X   11a   |
|---|---|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may  | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMIT                                   | ITEE  |   |   |
| Full Name (Last, First, Middle Initial) Heather Foti                                      |   |   | Date of Receipt   |
| Mailing Address 420 E Ohio St Apt 2   | 9A  |   | 05 01 2008  |
| City<br>Chicago   | State<br>IL   | Zip Code<br>60611-4663  | Transaction ID: SA11AI.23741  |
| FEC ID number of contributing federal political committee.                                | C   | 00011-4003  | Amount of Each Receipt this Period  100.00  |
| Name of Employer<br>Information Requested   | Occupation  | n<br>on Requested   | Contribution  |
| Receipt For:  Primary  General  Other (specify) ▼   |   | Year-to-Date ▼ 500.00   |   |
| Full Name (Last, First, Middle Initial) Jacqueline Fowler                                 |   |   | Date of Receipt   |
| Mailing Address 232 Frostwood Dr  |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Columbia  | State<br>SC   | Zip Code<br>29212-1169  | Transaction ID: SA11AI.23742  Amount of Each Receipt this Period                            |
| FEC ID number of contributing federal political committee.                                | C   | 29212-1109  | 250.00  |
| Name of Employer<br>The Office Place  | Occupation<br>Owner   | n   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  |   | Year-to-Date ▼ 350.00   |   |
| Full Name (Last, First, Middle Initial) Andrew Fox  |   |   | Date of Receipt   |
| Mailing Address 1201 Overlook Road  | d   |   | 0 5 1 6 2 0 0 8   |
| City<br>Whitehall   | State<br>PA   | Zip Code<br>18052-6124  | Transaction ID: SA11AI.23746  |
| FEC ID number of contributing federal political committee.                                | C   | 18032-0124  | Amount of Each Receipt this Period  250.00  |
| Name of Employer<br>KNBT  | Occupation Commercial | n<br>cial Lender  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate   | Year-to-Date ▼ 250.00   |   |
| SUBTOTAL of Receipts This Page (optional)   | )   |   | 600.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                        | FOR LINE NUMBER: PAGE 38 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16                  |
|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMIT   | Statements may not be sold or used by any pe<br>le name and address of any political committee | rson for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Julia Fox  Mailing Address 536 S 5th St  City West Dundee  FEC ID number of contributing federal political committee.  Name of Employer Bell Flavors & Fragances  Receipt For:  Primary General Other (specify) ▼ | State Zip Code IL 60118-2828  C  Occupation Controller  Aggregate Year-to-Date ▼  475.00       | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |
| Full Name (Last, First, Middle Initial) Virginia Gallenberger  Mailing Address 1831 NW 45th Ter  City Ocala  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)           | State Zip Code FL 34482-8563  C  Occupation Retired Aggregate Year-to-Date   375.00            | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |
| Full Name (Last, First, Middle Initial) Clyde N. Garman Mailing Address 400 S Broadway PI A  City Tucson  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)              | pt 1351  State Zip Code AZ 85710-3412  C  Occupation Retired  Aggregate Year-to-Date ▼  210.00 | Date of Receipt    M   |
| SUBTOTAL of Receipts This Page (optional)   |  | 335.00   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | <b>A</b> )                            | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only one)    X   11a   |
|---|---------------------------------------|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using | nd Statements may<br>the name and add | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMM                                   |                                       |   |   |
| Full Name (Last, First, Middle Initial) Peggy Garner                                    |                                       |   | Date of Receipt   |
| Mailing Address 218 Diane Dr  |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Madison   | State<br>TN                           | Zip Code  | Transaction ID: SA11AI.23807  |
| FEC ID number of contributing federal political committee.                              | C                                     | 37115-2564  | Amount of Each Receipt this Period  35.00   |
| Name of Employer<br>Retired   | Occupation Retired                    | n   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  |                                       | Year-to-Date ▼ 210.00   |   |
| Full Name (Last, First, Middle Initial) June R. Genis                                   |                                       |   | Date of Receipt   |
| Mailing Address 142 Rainbow Dr #  | 4275                                  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Livingston  | State<br>TX                           | Zip Code<br>77399-1042  | Transaction ID: SA11AI.23831  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.                              | C                                     | 77000 1012  | 85.00   |
| Name of Employer<br>Information Requested   | Occupation                            | n<br>on Requested   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  |                                       | Year-to-Date ▼ 425.00   |   |
| Full Name (Last, First, Middle Initial) June R. Genis                                   |                                       |   | Date of Receipt   |
| Mailing Address 142 Rainbow Dr #  | 4275                                  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Livingston  | State<br>TX                           | Zip Code<br>77399-1042  | Transaction ID: SA11AI.23832  |
| FEC ID number of contributing federal political committee.                              | C                                     | 77399-1042  | Amount of Each Receipt this Period  500.00  |
| Name of Employer<br>Information Requested   | Occupation<br>Informati               | n<br>on Requested   | Contribution  |
| Receipt For: Primary General Other (specify)  | <del></del>                           | Year-to-Date ▼ 925.00   |   |
| SUBTOTAL of Receipts This Page (options   | al)                                   |   | 620.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   |                                | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 40 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16              |
|---|--------------------------------|---|---|
| Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTE  | name and add                   | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jay Gillotte Mailing Address 8220 David Hwy  City Lyons  FEC ID number of contributing federal political committee.  Name of Employer Presort Services, Inc.  Receipt For: Primary General Other (specify)                | State MI C Occupation Bus. Own |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| Full Name (Last, First, Middle Initial) Bruce S. Gosling Mailing Address 20388 E Us Highway 1  City White Pigeon  FEC ID number of contributing federal political committee.  Name of Employer Norman Paulsen, P.C.  Receipt For: Primary General Other (specify) | State MI  C  Occupation CPA    | Zip Code<br>49099-9750  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| Full Name (Last, First, Middle Initial) Pete Guard  Mailing Address PO Box 6925  City Brandon  FEC ID number of contributing federal political committee.  Name of Employer American Automobile Associatio  Receipt For:  Primary General Other (specify)         |                                | Zip Code 33508-6015  The Programmer Programmer Pear-to-Date  250.00           | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| SUBTOTAL of Receipts This Page (optional)   |                                |   | 275.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                             | FOR LINE NUMBER: PAGE 41 / 183 (check only one)    X   11a |
|--|---|--|
| or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)              | Statements may not be sold or used by any pers<br>he name and address of any political committee to | on for the purpose of soliciting contributions             |
| LIBERTARIAN NATIONAL COMMIT  | TEE   |  |
| Full Name (Last, First, Middle Initial) George S. Halepis Mailing Address 253 Terrace Rd |   | Date of Receipt  |
| City   | State Zip Code  | 0 5 1 4 2 0 0 8 Transaction ID: SA11AI.24005               |
| Tarpon Spgs  | FL 34689-1907   | Amount of Each Receipt this Period                         |
| FEC ID number of contributing federal political committee.                               | C   | 50.00  |
| Name of Employer<br>Ramala Express   | Occupation Security   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 220.00   |  |
| Full Name (Last, First, Middle Initial) William W. Hall                                  |   | Date of Receipt  |
| Mailing Address 11002 Stegman Fore   | est Ct NE   | 05 28 2008   |
| City   | State Zip Code  | Transaction ID: SA11Al.24011                               |
| Rockford   | MI 49341-8742   | Amount of Each Receipt this Period                         |
| FEC ID number of contributing federal political committee.                               | C   | 5000.00  Contribution                                      |
| Name of Employer<br>Warner Norcross & Judd LLP   | Occupation<br>Attorney  |  |
| Receipt For: Primary General   | Aggregate Year-to-Date ▼  | _  |
| Other (specify) ▼  | 5000.00   |  |
| Full Name (Last, First, Middle Initial)<br>Henry E. Haller                               |   | Date of Receipt  |
| Mailing Address 6196 Ridge Rd  |   | 05 28 2008   |
| City   | State Zip Code  | Transaction ID: SA11AI.24013                               |
| Valencia   | PA 16059-1734   | Amount of Each Receipt this Period                         |
| FEC ID number of contributing federal political committee.                               | C   | 250.00<br>Contribution                                     |
| Name of Employer<br>Self Employed  | Occupation Retailer   | Contribution   |
| Receipt For: Primary General   | Aggregate Year-to-Date ▼  | _  |
| Other (specify)  | 270.00  |  |
|  |   | 5300.00  |

| CHEDULE A (FEC Form 3X<br>FEMIZED RECEIPTS  | )                      | Use separate schedule(s) for each category of the Detailed Summary Page    | FOR LINE NUMBER: PAGE 42 / 183 (check only one)    X             |
|---|------------------------|--|--|
| ny information copied from such Reports and for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  > LIBERTARIAN NATIONAL COMMIT | he name and ad         | y not be sold or used by any person<br>dress of any political committee to | on for the purpose of soliciting contributions                   |
| Full Name (Last, First, Middle Initial)   | 166                    |  | T  |
| Edwin R. Haney  Mailing Address 1501 Karin St   |                        |  | Date of Receipt  0 5 2 7 2 0 0 8                                 |
| City<br>Ironton   | State<br>OH            | Zip Code<br>45638-1157   | Transaction ID: SA11AI.24032  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      |  | 100.00   |
| Name of Employer<br>Self Employed   | Occupatio<br>Fiction A |  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 225.00  | ]  |
| Full Name (Last, First, Middle Initial)<br>Leslie C. Hardison   |                        |  | Date of Receipt  |
| Mailing Address 26803 W Apple Tree  | e Ln                   |  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| City  | State                  | Zip Code   | Transaction ID: SA11AI.24043                                     |
| Barrington  | <u>IL</u>              | 60010-2437   | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee.  | C                      |  | 400.00  Contribution   |
| Name of Employer<br>Retired   | Occupatio<br>Retired   | n  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 900.00  |  |
| Full Name (Last, First, Middle Initial)<br>Wayne E. Harley  |                        |  | Date of Receipt  |
| Mailing Address 1315 Richmond Dr  |                        |  | 05 01 YYYYY<br>05 01 2008  |
| City<br>Melbourne   | State<br>FL            | Zip Code<br>32935-5325   | Transaction ID: SA11AI.24047  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      |  | 100.00   |
| Name of Employer<br>Rockwell Collins Avionics   | Occupatio<br>Sr Eng T  | n<br>est Technician  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼ 500.00  |  |
| SUBTOTAL of Receipts This Page (optional)   |                        |  | 600.00   |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 43 / 183 (check only one)    X   11a                                  |
|---|---|---|---|
| Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTE  | name and add                            | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) George A. Harper Mailing Address 3628 Fm 2611 Rd  City Brazoria  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) |   | Zip Code 77422-9795  n ion Requested e Year-to-Date ▼ 250.00                  | Date of Receipt  0 5  |
| Full Name (Last, First, Middle Initial) Jim Harris  Mailing Address PO Box 740  City  E Northport  FEC ID number of contributing federal political committee.  Name of Employer Harris Precast  Receipt For: Primary General Other (specify)              | <u> </u>                                | Zip Code 11731-0496  n ion Requested e Year-to-Date ▼ 288.80                  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| Full Name (Last, First, Middle Initial) Bert G. Hassler  Mailing Address 128 Elkins Ave  City  Arcadia  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For:  Primary General  Other (specify)              | State CA C Occupation Retired Aggregate | Zip Code<br>91006-1711<br>n<br>e Year-to-Date ▼                               | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| SUBTOTAL of Receipts This Page (optional)   |   |   | 367.76  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                             | FOR LINE NUMBER: PAGE 44 / 183 (check only one)    X   11a                                  |
|---|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTE  | name and address of any political committee to  | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Thomas F. Hastings Mailing Address 10009 Vista Dr  City Lenexa FEC ID number of contributing federal political committee.  Name of Employer Bayer Corporation  Receipt For: Primary General Other (specify)     | State Zip Code KS 66220-2637  C  Occupation Veterinary Pathologist  Aggregate Year-to-Date   450.00 | Date of Receipt    M M   D D   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Full Name (Last, First, Middle Initial) Gerald Eugene Hatch Mailing Address 7030 Saulsbury St  City Arvada  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)          | State Zip Code CO 80003-3554  C  Occupation Retired  Aggregate Year-to-Date  225.00                 | Date of Receipt    M   M   O   D   O   O   O   O   O   O   O   O                            |
| Full Name (Last, First, Middle Initial) Peter A. Hatch Mailing Address 1578 Carole Way  City Redwood City  FEC ID number of contributing federal political committee.  Name of Employer Cascal Furn. Inc.  Receipt For: Primary General Other (specify) | State Zip Code CA 94061-2776  C  Occupation bookkeeper  Aggregate Year-to-Date  300.00              | Date of Receipt    M M M  |
| SUBTOTAL of Receipts This Page (optional)   |   | 500.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                       | FOR LINE NUMBER: PAGE 45 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16                |
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| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTED | Statements may not be sold or used by any perse name and address of any political committee t | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial)   | , EE  |  |
| Ken Heinemann  Mailing Address 3901 S Via Del Ruise   | nor   | Date of Receipt  0 5 0 1 2 0 0 8   |
| City<br>Green Valley  | State Zip Code AZ 85614-5017  | Transaction ID: SA11AI.24131  Amount of Each Receipt this Period                             |
| FEC ID number of contributing federal political committee.  | C   | 100.00   |
| Name of Employer<br>Retired   | Occupation<br>Retired   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 575.00   |  |
| Full Name (Last, First, Middle Initial) Robert D. Helmholdt Mailing Address 1700 NE 26th St   |   | Date of Receipt  |
| City  | State Zip Code  | 0 5 2 7 2 0 0 8 Transaction ID: SA11AI.24139   |
| Wilton Manors   | FL 33305-1430   | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.  | C   | 100.00   |
| Name of Employer<br>Self Employed   | Occupation Information Requested  | Contribution   |
| Receipt For: Primary General Other (specify)  | Aggregate Year-to-Date ▼ 250.00   |  |
| Full Name (Last, First, Middle Initial)<br>Ron B. Helwig  |   | Date of Receipt  |
| Mailing Address PO Box 12   |   | 05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City<br>Deerfield   | State         Zip Code           NH         03037-0012  | Transaction ID: SA11AI.24140  Amount of Each Receipt this Period                             |
| FEC ID number of contributing federal political committee.  | C   | 50.00  |
| Name of Employer<br>Connect Computer  | Occupation<br>Consultant  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 250.00   |  |
| SUBTOTAL of Receipts This Page (optional)   |   | 250.00   |

| SCHEDULE A (FEC Form : ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                                  | FOR LINE NUMBER: PAGE 46 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17         |
|---|--|--|
| Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COM   | and Statements may not be sold or used by any persong the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) James Henke Mailing Address 920 Thorndale S  City Indianapolis  FEC ID number of contributing   | State Zip Code<br>IN 46214-3705  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                           |
| receipt For:  Primary  Other (specify) ▼  | Occupation Information Requested  Aggregate Year-to-Date   225.00  | — Contribution   |
| Full Name (Last, First, Middle Initial) Brad W. Henry Mailing Address 3606 41st Ave W  City Seattle  FEC ID number of contributing federal political committee.  Name of Employer Mindworks, Inc. | State Zip Code WA 98199-1836  C Occupation Software Engineer   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                           |
| Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Phillip Michael Herrin  | Aggregate Year-to-Date ▼ 250.00  | Date of Receipt  |
| Mailing Address 135 RayRidge Rock City Albany FEC ID number of contributing federal political committee.  Name of Employer US Army Corps Of Eng. Receipt For:                                     | State Zip Code KY 42602-9803  C  Occupation PowerPlant Operator  Aggregate Year-to-Date                  | Transaction ID: SA11AI.24161  Amount of Each Receipt this Period  20.00  Contribution    |
| Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (option   | 375.00   | 245.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   |                               | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 47 / 183 (check only one)    X   11a                                  |
|--|-------------------------------|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and ad                 | y not be sold or used by any persondress of any political committee to        | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Phillip Michael Herrin  Mailing Address 135 RayRidge Rd  City Albany  FEC ID number of contributing federal political committee.  Name of Employer US Army Corps Of Eng.  Receipt For: Primary General Other (specify) |                               | Zip Code 42602-9803  In ant Operator  2 Year-to-Date ▼ 450.00                 | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| Full Name (Last, First, Middle Initial) Regan Philip Hess  Mailing Address 282382 Us Highway 1  City Port Townsend  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)         | State WA  C Occupatio Retired | Zip Code<br>98368-9396<br>In<br>e Year-to-Date ▼                              | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Full Name (Last, First, Middle Initial) Regan Philip Hess  Mailing Address 282382 Us Highway 1  City Port Townsend  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)         | State WA  C Occupatio Retired | Zip Code<br>98368-9396<br>In<br>e Year-to-Date ▼                              | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| SUBTOTAL of Receipts This Page (optional) .  |                               |   | 155.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                        | FOR LINE NUMBER: PAGE 48 / 183 (check only one)    X  |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jason Cory Hitt  Mailing Address 2648 Heritage Lndg  City Saint Charles  FEC ID number of contributing federal political committee.  Name of Employer Alter Trading  Receipt For: Primary General Other (specify)              | State Zip Code MO 63303-6120  C  Occupation Software Engineer Aggregate Year-to-Date   450.00  | Date of Receipt    M  |
| Full Name (Last, First, Middle Initial) Richard T. Hogan  Mailing Address 4425 Shorewood Dr N  City  Hoffman Estates  FEC ID number of contributing federal political committee.  Name of Employer Zurich North America  Receipt For:  Primary General Other (specify) | State Zip Code IL 60192-1018  C  Occupation Systems Programmer  Aggregate Year-to-Date  350.00 | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                            |
| Full Name (Last, First, Middle Initial)  Douglas Hoiles  Mailing Address 10047 E Acampo Rd  City  Acampo  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For:  Primary General  Other (specify)                         | State Zip Code CA 95220-9480  C  Occupation Retired  Aggregate Year-to-Date  350.00            | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| SUBTOTAL of Receipts This Page (optional)  |  | 350.00  |

| SCHEDULE A (FEC Form   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 49 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 1               |
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| Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL CO | ts and Statements may not be sold or used by any persising the name and address of any political committee to MMITTEE | son for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Barbara Howe Mailing Address 5046 Tar Hill C   | r<br>State Zip Code   | Date of Receipt    M M M  |
| Oxford  FEC ID number of contributing federal political committee.   | NC 27565-5416   | Amount of Each Receipt this Period 100.00   |
| Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) ▼   | Occupation Information Requested  Aggregate Year-to-Date   300.00   | Contribution  |
| Full Name (Last, First, Middle Initial) Lincoln B. Hubbard Mailing Address 4113 W End R  | <u> </u>  | Date of Receipt  0 5 0 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7                                  |
| City  Downers Grove  FEC ID number of contributing federal political committee.  | State Zip Code  IL 60515-2307  C  | Transaction ID: SA11AI.24292  Amount of Each Receipt this Period  100.00                      |
| Name of Employer Hubbard, Broadbent & Associates LTD. Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼                      | Occupation Radiological Physicist Aggregate Year-to-Date   500.00   | Contribution  |
| Full Name (Last, First, Middle Initial) Lincoln B. Hubbard Mailing Address 4113 W End R  | <u> </u>  | Date of Receipt   |
| City  Downers Grove  | State Zip Code<br>IL 60515-2307   | Transaction ID: SA11AI.24293  Amount of Each Receipt this Period                              |
| FEC ID number of contributing federal political committee.  Name of Employer Hubbard, Broadbent & Associates LTD.                | Occupation Radiological Physicist   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 600.00   |   |
| SUBTOTAL of Receipts This Page (o  | tional)   | 300.00  |

|                | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                          | FOR LINE NUMBER: PAGE 50 / 183 (check only one)    X   11a   |
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| A              | ny information copied from such Reports and S<br>r for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITT  | name and address of any political committee t  | son for the purpose of soliciting contributions to solicit contributions from such committee.                              |
| <b>A</b> .     | Full Name (Last, First, Middle Initial) William Y. Humphreys Mailing Address 404 Spyglass Ln  City Vero Beach  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General Other (specify) | State Zip Code FL 32963-4367  C  Occupation Information Requested Aggregate Year-to-Date  225.00 | Date of Receipt  M M M J D D J 2008  Transaction ID: SA11AI.24315  Amount of Each Receipt this Period  25.00  Contribution |
| <u>—</u><br>В. | Full Name (Last, First, Middle Initial) Thomas Alexander Hunter Mailing Address 3465 Meadow Rdg  City Redding  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                | State Zip Code CT 06896-3230  C  Occupation Retired  Aggregate Year-to-Date ▼  300.00            | Date of Receipt    M M   |
|                | Full Name (Last, First, Middle Initial) Thomas Alexander Hunter Mailing Address 3465 Meadow Rdg  City Redding  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                | State Zip Code CT 06896-3230  C  Occupation Retired  Aggregate Year-to-Date   400.00             | Date of Receipt    M M M   |
| Ę              | SUBTOTAL of Receipts This Page (optional)  |  | 225.00   |

|                                | IEDULE A (FEC Form 3X) MIZED RECEIPTS   | fo  | Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 51 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17            |
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| or for o                       | formation copied from such Reports and S<br>commercial purposes, other than using the<br>ME OF COMMITTEE (In Full)<br>BERTARIAN NATIONAL COMMITTE | name and address                                    | be sold or used by any perso<br>s of any political committee to              | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| A. Ste Ma City De FE fed Na US | C ID number of contributing leral political committee.  me of Employer S Postal Service   | State CO C Occupation Mechanic                      | Zip Code<br>80229-2655   | Date of Receipt    M M M  |
|                                | ceipt For: Primary General Other (specify) ▼  Il Name (Last, First, Middle Initial)   | Aggregate Yea                                       | r-to-Date ▼ 575.00   | ]   |
| A. Kin Ma City No FE fed       | n Jackson<br>illing Address 519 Signal Hill Rd  | State IL  C  Occupation Information I Aggregate Yea | •  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| ). <u>Ch</u>                   | Other (specify) ▼  II Name (Last, First, Middle Initial) arles M. Jensen  illing Address 2630 Muirfield Dr  | State   | 225.00<br>Zip Code   | Date of Receipt    M  |
| <u>W</u><br>FE                 | estland C ID number of contributing leral political committee.  | MI  | 48186-5491   | Amount of Each Receipt this Period 40.00  |
| <u>ed</u> )                    | me of Employer rd Motor Company (Retir- ) ceipt For: Primary General Other (specify)  | Occupation Retired Engir Aggregate Yea              |  | Contribution  |
| SUB                            | FOTAL of Receipts This Page (optional)  | I   |  | 100.00  |

|          | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                      | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 52 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 1            |
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| A<br>0   | ny information copied from such Reports and Stror commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and add       | y not be sold or used by any persodress of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| $\angle$ | LIBERTARIAN NATIONAL COMMITT  | EE                   |   |   |
| •        | Full Name (Last, First, Middle Initial) Charles M. Jensen   |                      |   | Date of Receipt   |
|          | Mailing Address 2630 Muirfield Dr   |                      |   | 05 13 2008  |
|          | City<br>Westland  | State<br>MI          | Zip Code<br>48186-5491  | Transaction ID: SA11AI.24373  Amount of Each Receipt this Period                            |
|          | FEC ID number of contributing federal political committee.  | C                    |   | 100.00  |
|          | Name of Employer<br>Ford Motor Company (Retir-<br>ed)   | Occupation Retired E |   | Contribution  |
|          | Receipt For: Primary General Other (specify)  |                      | e Year-to-Date ▼<br>450.00  |   |
|          | Full Name (Last, First, Middle Initial)<br>Lawrence Walter Johnson  |                      |   | Date of Receipt   |
|          | Mailing Address 1659 Wingate Blvd   |                      |   | 05 01 YYYY<br>2008  |
|          | City  | State                | Zip Code  | Transaction ID: SA11AI.24395  |
|          | Ypsilanti FEC ID number of contributing federal political committee.  | C                    | 48198-6531  | Amount of Each Receipt this Period  35.00   |
|          | Name of Employer<br>Comcast   | Occupation           | n<br>Il Support Specialist  | Contribution  |
|          | Receipt For:  |                      | e Year-to-Date ▼  |   |
|          | Primary General Other (specify) ▼   |                      | 205.00  |   |
| _        | Full Name (Last, First, Middle Initial)<br>John Brady Jones   |                      |   | Date of Receipt   |
|          | Mailing Address 402 Massie St   |                      |   | 05 01 YYYYY<br>2008   |
|          | City  | State                | Zip Code  | Transaction ID: SA11AI.24423  |
|          | Atlanta FEC ID number of contributing federal political committee.  | C                    | 75551-2332  | Amount of Each Receipt this Period  60.00   |
|          | Name of Employer<br>Ward Timber Co., Inc.   | Occupation Forester  | n   | Contribution  |
|          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼ 300.00   |   |
|          | SUBTOTAL of Receipts This Page (optional) .   | 1                    |   | 195.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(<br>for each category of the<br>Detailed Summary Page                  | (Crieck Grilly Grie)   |
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| Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT   |  | person for the purpose of soliciting contributions tee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Robert D. Kampia  Mailing Address 1000 Park Road, NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer Marijuana Policy Project  Receipt For: Primary General Other (specify) | State Zip Code DC 20013-0000  C Occupation Executive Director  Aggregate Year-to-Date  425.0 | Date of Receipt    M M   |
| Full Name (Last, First, Middle Initial) Daniel M. Karlan Mailing Address 97 Manhattan Ave  City Waldwick  FEC ID number of contributing federal political committee.  Name of Employer Self employed  Receipt For: Primary General Other (specify)                 | State Zip Code NJ 07463-2228  C Occupation Author Aggregate Year-to-Date  500.0              | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                       |
| Full Name (Last, First, Middle Initial) Edward W. Karpinski  Mailing Address 3457 Iroquois St  City  Detroit  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For:  Primary  General  Other (specify)                | State Zip Code MI 48214-1839  C  Occupation Retired  Aggregate Year-to-Date  425.0           | Date of Receipt    M M   |
| SUBTOTAL of Receipts This Page (optional) .  |  | 200.00   |

|    | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                                   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 54 / 183 (check only one)    X   11a                                  |
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| Ai | ny information copied from such Reports and S<br>for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITTI | e name and add                    | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|    | Full Name (Last, First, Middle Initial) Edward W. Karpinski Mailing Address 3457 Iroquois St  City   | State                             | Zip Code  | Date of Receipt    M  |
|    | Detroit  FEC ID number of contributing federal political committee.  | C                                 | 48214-1839  | Amount of Each Receipt this Period  50.00  Contribution                                     |
|    | Name of Employer Retired  Receipt For:  Primary  General  Other (specify) ▼  | Occupatio<br>Retired<br>Aggregate | e Year-to-Date ▼ 475.00   |   |
| 3. | Full Name (Last, First, Middle Initial) Dave Kaufman Mailing Address 310 W Wayne Pl  | •                                 |   | Date of Receipt  0 5 1 5 2 0 0 8  |
|    | City Wheeling FEC ID number of contributing  | State<br>IL                       | Zip Code<br>60090-4637  | Transaction ID: SA11AI.24488  Amount of Each Receipt this Period                            |
|    | Name of Employer Howard Simon & Associates, Inc Receipt For: Primary General   |                                   | ent Plan Administr e Year-to-Date ▼                                       | - Contribution  |
|    | Other (specify) ▼  Full Name (Last, First, Middle Initial)  Jeremy Keil  Mailing Address 3808 S 102nd St   |                                   |   | Date of Receipt   |
|    | City   | State                             | Zip Code  | 0 5 0 1 2 0 0 8  Transaction ID: SA11AI.24500   |
|    | Milwaukee  FEC ID number of contributing federal political committee.  | C                                 | 53228-1328  | Amount of Each Receipt this Period  10.00   |
|    | Name of Employer<br>Thrivent Financial   | Occupatio<br>Financia             | n<br>I Associate  | Contribution  |
|    | Receipt For: Primary General Other (specify)   | Aggregate                         | e Year-to-Date ▼<br>610.00  |   |
| s  | SUBTOTAL of Receipts This Page (optional)  |                                   |   | 160.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                | FOR LINE NUMBER: PAGE 55 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTED   | e name and address of any political committee  | son for the purpose of soliciting contributions                               |
| Full Name (Last, First, Middle Initial) Douglas C. Keith Mailing Address 1448 Turner Farms F  City Garner  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) |  | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y              |
| Full Name (Last, First, Middle Initial) Rebecca Kelly Mailing Address 700 Greystone Park I  City Atlanta  FEC ID number of contributing federal political committee.  Name of Employer Southern Tech  Receipt For: Primary General Other (specify)          | State Zip Code GA 30324-5297  C  Occupation Professor  Aggregate Year-to-Date   420.00 | Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |
| Full Name (Last, First, Middle Initial) Richard S. Kerr  Mailing Address 483 Rebecca St  City  Morgantown  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General Other (specify)        | State Zip Code WV 26505-2246  C  Occupation Physician  Aggregate Year-to-Date  235.00  | Date of Receipt    M M M  |
| SUBTOTAL of Receipts This Page (optional)   |  | 125.00  |

| SCHEDULE A (FEC For ITEMIZED RECEIPTS                               | n 3X)  Use separate schedule(s) for each category of the Detailed Summary Page                                     | FOR LINE NUMBER: PAGE 56 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 11 |
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| or for commercial purposes, other than  NAME OF COMMITTEE (In Full) | orts and Statements may not be sold or used by any person using the name and address of any political committee to | on for the purpose of soliciting contributions                                    |
| LIBERTARIAN NATIONAL CO   |  |   |
| Brian Kiernan  Mailing Address 435 Carpente                         | ,  | Date of Receipt  0 5 0 1 2 0 0 8  |
| City<br>Downingtown   | State Zip Code<br>PA 19335-4541  | Transaction ID: SA11AI.24537 Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.          | C  | 50.00   |
| Name of Employer<br>Interdigital Comm Corp                          | Occupation Executive   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼                    | Aggregate Year-to-Date ▼ 250.00  |   |
| Full Name (Last, First, Middle Initia                               | ,  | Date of Receipt   |
| Mailing Address 1105 Sunset I                                       | 0 5 0 1 Y Y Y Y Y Y Y  |   |
| City  | State Zip Code   | Transaction ID: SA11AI.24563  |
| Somerdale   | NJ 08083-1925  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.          | C  | 15.00  Contribution   |
| Name of Employer<br>Retired   | Occupation Retired   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼                    | Aggregate Year-to-Date ▼ 210.00  |   |
| Full Name (Last, First, Middle Initia<br>Edward Klapproth           |  | Date of Receipt   |
| Mailing Address 1021 Prestwic                                       | sk St  | 05 01 7 2008  |
| City<br><u>Las Vegas</u>  | State Zip Code<br>NV 89145-8520  | Transaction ID: SA11AI.24566  |
| FEC ID number of contributing federal political committee.          | NV 89145-8520  | Amount of Each Receipt this Period  85.00   |
| Name of Employer<br>CCSN  | Occupation Professor   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼                    | Aggregate Year-to-Date ▼ 425.00  |   |
| SUPTOTAL of Possints This Page (                                    | optional)  | 150.00  |

|   | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |   | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 57 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 1            |
|---|--|---|---|---|
| A | ny information copied from such Reports and S<br>for commercial purposes, other than using the | Statements may<br>e name and add                  | not be sold or used by any pers<br>dress of any political committee to  | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|   | NAME OF COMMITTEE (In Full) P LIBERTARIAN NATIONAL COMMITT                                     | EE  |   |   |
|   | Full Name (Last, First, Middle Initial)<br>Manuel S. Klausner                                  |   |   | Date of Receipt   |
|   | Mailing Address 5538 Red Oak Dr  |   |   | 05 / 28 / 2008  |
|   | City Los Angeles   | State<br>CA                                       | Zip Code<br>90068-2551  | Transaction ID: SA11AI.24569  |
|   | FEC ID number of contributing federal political committee.                                     | C   | 90000-2331  | Amount of Each Receipt this Period 500.00   |
|   | Name of Employer<br>Kindel & Anderson  | Occupation<br>Lawyer                              | 1   | Contribution  |
|   | Receipt For:  Primary General  Other (specify) ▼   | <del>, ' ' '                               </del> | Year-to-Date ▼ 500.00   |   |
| _ | Full Name (Last, First, Middle Initial)<br>David F. Klein                                      | _   |   | Date of Receipt   |
|   | Mailing Address 254 Township Line Ro   | 05 01 YYYY<br>2008                                |   |   |
|   | City   | Transaction ID: SA11AI.24571                      |   |   |
|   | Port Angeles   | WA  | 98362-7433  | Amount of Each Receipt this Period  |
|   | FEC ID number of contributing federal political committee.                                     | C   |   | 100.00  |
|   | Name of Employer<br>Information Requested  | Occupation<br>Informati                           | n<br>on Requested   | Contribution  |
|   | Receipt For: Primary General Other (specify)   | Aggregate   | Year-to-Date ▼ 500.00   |   |
|   | Full Name (Last, First, Middle Initial)<br>Emil Alfred Kleiner                                 |   |   | Date of Receipt   |
|   | Mailing Address 45 Springfield Dr  |   |   | 05 14 2008  |
|   | City   | State   | Zip Code  | Transaction ID: SA11AI.24575  |
|   | North East   | MD  | 21901-1332  | Amount of Each Receipt this Period  |
|   | FEC ID number of contributing federal political committee.                                     | C   |   | 100.00  |
|   | Name of Employer<br>Adecco Technical   | Occupation<br>Sr. Project                         | n<br>ct Engineer  | Contribution  |
|   | Receipt For: Primary General Other (specify)   | Aggregate   | Year-to-Date ▼ 250.00   |   |
|   | SUBTOTAL of Receipts This Page (optional)  | 1   |   | 700.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   |                | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 58 / 183 (check only one)    X |
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| Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) |                | not be sold or used by any perso<br>dress of any political committee to |  |
| Full Name (Last, First, Middle Initial) John A. Kleiner  | EE             |   | Date of Receipt                                      |
| Mailing Address 46 Greenfield Dr  City   | State          | Zip Code  | 0 5 0 1 2 0 0 8  Transaction ID: SA11Al.24576        |
| Moraga   | CA             | 94556-1333  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.   | C              |   | 35.00  |
| Name of Employer<br>Information Requested<br>Receipt For:  |                | n<br>on Requested<br>Year-to-Date ▼                                     | Contribution   |
| Primary ☐ General Other (specify) ▼  | 0 0            | 655.00  |  |
| Full Name (Last, First, Middle Initial) Bernadette Klink Mailing Address 4833 Fountain Ave                                 |                |   | Date of Receipt                                      |
| Walling Address 4055 Fourtain Ave  |                |   | 05 13 2008   |
| City   | State          | Zip Code  | Transaction ID: SA11AI.24583                         |
| Los Angeles  | CA             | 90029-1603  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.   | C              |   | 100.00  Contribution                                 |
| Name of Employer<br>Church of Scientology  |                | r Systems Tester  |  |
| Receipt For:  Primary  General   | Aggregate      | Year-to-Date ▼  | -  |
| Other (specify)  |                | 300.00  |  |
| Full Name (Last, First, Middle Initial) Johnny Klonaris  | •              |   | Date of Receipt                                      |
| Mailing Address 2151 Oakland Rd Spo  | 371            |   | 05 01 2008   |
| City   | State          | Zip Code  | Transaction ID: SA11AI.24585                         |
| San Jose   | CA             | 95131-1539  | Amount of Each Receipt this Period                   |
| FEC ID number of contributing federal political committee.   | C              |   | 50.00  |
| Name of Employer<br>Information Requested  | <del>- '</del> | on Requested  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate      | Year-to-Date ▼ 250.00   | ]  |
| SUBTOTAL of Receipts This Page (optional) .  |                |   | 185.00   |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                             | FOR LINE NUMBER: PAGE 59 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
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| or for commercial purposes, other than using t                                       | Statements may not be sold or used by any pers<br>he name and address of any political committee to | on for the purpose of soliciting contributions                                |
| NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT                             | TEE   |   |
| Full Name (Last, First, Middle Initial) John Kopecky  Mailing Address 8539 Hallet St |   | Date of Receipt   |
| City   | State Zip Code  | 0 5 1 3 2 0 0 8 Transaction ID: SA11Al.24610                                  |
| Lenexa   | KS 66215-6004   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.                           | C   | 250.00  |
| Name of Employer<br>Security Savings Bank  | Occupation CFO  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼                                     | Aggregate Year-to-Date ▼ 250.00   |   |
| Full Name (Last, First, Middle Initial)<br>Bob L. Krel                               |   | Date of Receipt   |
| Mailing Address 5001 Silver Sands A  | ve  | 05 27 2008  |
| City   | State Zip Code  | Transaction ID: SA11AI.24630  |
| El Paso  | TX 79924-1127   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.                           | C   | 125.00  |
| Name of Employer<br>None   | Occupation Retired  | Contribution  |
| Receipt For:   | Aggregate Year-to-Date ▼  |   |
| Primary General Other (specify) ▼  | 300.00  |   |
| Full Name (Last, First, Middle Initial)<br>John R. Kuhn                              |   | Date of Receipt   |
| Mailing Address 42 Church St   |   | 05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                     |
| City   | State Zip Code  | Transaction ID: SA11AI.24637  |
| Charleston   | SC 29401-2742   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.                           | C   | 30.00 Contribution  |
| Name of Employer<br>Cothran Law Office LLC   | Occupation<br>Attorney  | Contribution  |
| Receipt For:   | Aggregate Year-to-Date ▼  | _   |
| Primary General Other (specify) ▼  | 1150.00   |   |
| CURTOTAL of Descipts This Dags (antique)   |   | 405.00  |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE  Full Name (Last, First, Middle Initial)  John It Rutin  Malling Address 42 Church St  City  State  Primary  General  Other (specify) ▼  State  Zip Code  Appregate Year-to-Date  Transaction ID: SA11Al.24630  Amount of Each Receipt  Transaction ID: SA11Al.24640  Amount of Each Receipt fine Period  FECI ID number of contributing tederal political committee.  City  State  Zip Code  Transaction ID: SA11Al.24640  Amount of Each Receipt fine Period  FECI ID number of contributing tederal political committee.  City  State  Zip Code  Transaction ID: SA11Al.24640  Amount of Each Receipt fine Period  Transaction ID: SA11Al.24650  Amount of Each Receipt fine Period  Transaction ID: SA11Al.24650  Amount of Each Receipt fine Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  Transaction ID: SA11Al.24650  Amount of Each Receipt fine Period  FEC ID number of contributing federal political committee.  Contribution  Appregate Year-to-Date  PA 15219-5726  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date  PA 15219-5726  Transaction ID: SA11Al.24650  Amount of Each Receipt fine Period  Tederal political committee.  Appregate Year-to-Date  Zip Code  Transaction ID: SA11Al.24650  Amount of Each Receipt fine Period  Tederal political committee.  Aggregate Year-to-Date  Zip Code  Zip Code  Zip Code  Zip Code  Zi | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page      | FOR LINE NUMBER: PAGE 60 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
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| Date of Receipt    State  | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  | e name and address of any political committee to                             | n for the purpose of soliciting contributions solicit contributions from such committee. |
| James E. Kulp   Mailing Address 7 Dewey St  | John R. Kuhn  Mailing Address 42 Church St  City  Charleston  FEC ID number of contributing federal political committee.  Name of Employer Cothran Law Office LLC  Receipt For:  Primary General    | SC 29401-2742  C Occupation Attorney  Aggregate Year-to-Date ▼  1275.00      | Transaction ID: SA11AI.24638  Amount of Each Receipt this Period  125.00                 |
| Mailing Address 4245 Bryn Mawr Rd  City State Zip Code Pittsburgh PA 15219-5726  FEC ID number of contributing federal political committee.  Name of Employer U.Pitts.Med.School  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M D D D Q 2 9 2 0 0 8  Transaction ID: SA11Al.24650  Amount of Each Receipt this Period  Contribution  Contribution  Contribution  | James E. Kulp  Mailing Address 7 Dewey St  City  Exeter  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General          | NH 03833-1703  C  Occupation Information Requested  Aggregate Year-to-Date ▼ | Transaction ID: SA11AI.24640  Amount of Each Receipt this Period  125.00                 |
| SUBTOTAL of Receipts This Page (optional)   | Harold Kyriazi  Mailing Address 4245 Bryn Mawr Rd  City  Pittsburgh  FEC ID number of contributing federal political committee.  Name of Employer U.Pitts.Med.School  Receipt For:  Primary General | PA 15219-5726  C  Occupation Research Scientist  Aggregate Year-to-Date      | Transaction ID: SA11AI.24650  Amount of Each Receipt this Period  200.00                 |
|   | SUBTOTAL of Receipts This Page (optional) .   | · · · · · · · · · · · · · · · · · · ·  | 450.00   |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 61 / 183 (check only one)    X   11a                                  |
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| Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTE   |   | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Ben Lake  Mailing Address 7601 Churchill Way Ap  City  Dallas  FEC ID number of contributing federal political committee.  Name of Employer Wieck Media  Receipt For:  Primary General  Other (specify)      | State TX  C Occupation Web Dev            |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Full Name (Last, First, Middle Initial) James W. Lark Mailing Address PO Box 274  City Free Union  FEC ID number of contributing federal political committee.  Name of Employer University of Virginia  Receipt For: Primary General Other (specify) | State VA  C  Occupatio Professo Aggregate |   | Date of Receipt    M  |
| Full Name (Last, First, Middle Initial) James W. Lark Mailing Address PO Box 274  City Free Union  FEC ID number of contributing federal political committee.  Name of Employer University of Virginia  Receipt For: Primary General Other (specify) | State VA  C Occupation Professo Aggregate |   | Date of Receipt    M  |
| SUBTOTAL of Receipts This Page (optional)  |   |   | 5100.00   |

| SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   | for e                  | separate schedule(s)<br>each category of the<br>ailed Summary Page | FOR LINE NUMBER: PAGE 62 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | ne name and address of | sold or used by any perso<br>any political committee to            | n for the purpose of soliciting contributions                                 |
| Full Name (Last, First, Middle Initial) Charles Larson Mailing Address 3416 4th St  City Trenton  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                                    | State Ziņ              | o Code<br>8183-2949<br>o-Date ▼<br>250.00                          | Date of Receipt    M M  |
| Full Name (Last, First, Middle Initial)  Marcy Sue Larson  Mailing Address 2215 Cascade Lakes  City  Grand Rapids  FEC ID number of contributing federal political committee.  Name of Employer Forest Hills Pediatrics  Receipt For:  Primary General  Other (specify) | State Zip              | o Code<br>0546-6623<br>o-Date ▼                                    | Date of Receipt    M M  |
| Full Name (Last, First, Middle Initial) Leslie Jean Lazzerin  Mailing Address 1386 Bramblebush F  City Bloomfield  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                   | State Zip              | o Code<br>3304-1503<br>o-Date ▼<br>225.00                          | Date of Receipt    M M  |
| SUBTOTAL of Receipts This Page (optional)   |                        | ·····  | 625.00  |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS   | ) <b>^</b>               | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:   PAGE 63 / 183   (check only one)              |
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| Any information copied from such Reports or for commercial purposes, other than usin | and Statements may       | not be sold or used by any persoress of any political committee to      | on for the purpose of soliciting contributions                   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMM                                | MITTEE                   |   |  |
| Full Name (Last, First, Middle Initial) Jonathan Lee                                 |                          |   | Date of Receipt  |
| Mailing Address 1103 Saint John A  | Ave                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| City<br>Dyersburg  | State<br>TN              | Zip Code<br>38024-3370  | Transaction ID: SA11AI.24726  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.                           | C                        | 3302+3370   | 50.00  |
| Name of Employer<br>Nucor Steel-AR   | Occupation<br>Electricia |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼                                     | Aggregate                | Year-to-Date ▼<br>250.00  |  |
| Full Name (Last, First, Middle Initial) Robert Lempke                                |                          |   | Date of Receipt  |
| Mailing Address 4732 Taft Rd   |                          |   | 0 5 0 1 2 0 0 8  |
| City   | State                    | Zip Code  | Transaction ID: SA11Al.24743                                     |
| West Lafayette  FEC ID number of contributing federal political committee.           | C                        | 47906-5637  | Amount of Each Receipt this Period 30.00                         |
| Name of Employer   | Occupation               |   | Contribution   |
| Lafayette Anesthesiologis-<br>t, LL  | Anesthes                 |   |  |
| Receipt For:  Primary General  Other (specify) ▼                                     | Aggregate                | Year-to-Date ▼ 250.00   |  |
| Full Name (Last, First, Middle Initial)  |                          |   | B : (B : :   |
| Kenneth Lidonnici  Mailing Address 433 E 56th St                                     |                          |   | Date of Receipt  0 5 0 1 2 0 0 8                                 |
| City   | State                    | Zip Code  | Transaction ID: SA11AI.24770                                     |
| New York   | NY                       | 10022-2432  | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee.                           | C                        |   | 10.00  |
| Name of Employer<br>General A.V. Inc.  | Occupation<br>Engineer   |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼                                     | Aggregate                | Year-to-Date ▼ 240.00   |  |
| SUBTOTAL of Receipts This Page (option   | 221)                     |   | 90.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 64 / 183 (check only one)    X   11a   |
|---|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | ne name and add                           | y not be sold or used by any persodress of any political committee to         | on for the purpose of soliciting contributions   |
| LIBERTARIAN NATIONAL COMMIT  Full Name (Last, First, Middle Initial) Kenneth Lidonnici  Mailing Address 433 E 56th St  City New York  FEC ID number of contributing federal political committee.  Name of Employer General A.V. Inc.  Receipt For:  Primary General Other (specify) ▼ | State NY C Occupation Engineer            |   | Date of Receipt  0 5 2 0 2 0 8  Transaction ID: SA11AI.24771  Amount of Each Receipt this Period  100.00  Contribution |
| Full Name (Last, First, Middle Initial) Malaise Lindenfeld Mailing Address PO Box 106  City Dublin  FEC ID number of contributing federal political committee.  Name of Employer Infro Requested  Receipt For: Primary General Other (specify)  | State NH C Occupation Infor Req Aggregate |   | Date of Receipt    M   |
| Full Name (Last, First, Middle Initial) Walter Lineberger Mailing Address 20 Towne Dr # 395  City Bluffton  FEC ID number of contributing federal political committee.  Name of Employer Personalized Brokerage Service Receipt For:  Primary General Other (specify)                 | State SC C Occupation Officer Aggregate   | Zip Code<br>29910-4204  | Date of Receipt    M   |
| SUBTOTAL of Receipts This Page (optional)   |   | )   | 1200.00  |

|              | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                               | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 65 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 11            |
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| Ar           | ny information copied from such Reports and S<br>for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITT                                       | e name and add                | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| <u>∠</u><br> | Full Name (Last, First, Middle Initial) Southard Lippincott  Mailing Address 74 Tyler Ter  City Newton Center  FEC ID number of contributing federal political committee.  Name of Employer Retired | State MA  C Occupatio Retired | Zip Code<br>02459-1814  | Date of Receipt    M M  |
|              | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                     | e Year-to-Date ▼<br>225.00  |   |
| 3.           | Full Name (Last, First, Middle Initial) Kenneth L. Locher Mailing Address 141 Lois Ln   |                               |   | Date of Receipt  0 5 1 3 2 0 0 8  |
|              | City Vallejo  FEC ID number of contributing federal political committee.  | State<br>CA                   | Zip Code<br>94590-3556  | Transaction ID: SA11AI.24799  Amount of Each Receipt this Period  60.00  Contribution       |
|              | Name of Employer KL Locher Inc.  Receipt For: Primary General Other (specify)   | <del>, '</del>                | anagement<br>e Year-to-Date ▼<br>240.00                                       |   |
| <u> </u>     | Full Name (Last, First, Middle Initial) Kenneth L. Locher Mailing Address 141 Lois Ln   |                               |   | Date of Receipt  0 5 1 3 2 0 0 8  |
|              | City Vallejo FEC ID number of contributing  | State<br>CA                   | Zip Code<br>94590-3556  | Transaction ID: SA11AI.24800  Amount of Each Receipt this Period  60.00                     |
|              | Name of Employer KL Locher Inc.   | Occupatio                     | n<br>anagement  | Contribution  |
|              | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                     | e Year-to-Date ▼ 300.00   |   |
| s            | UBTOTAL of Receipts This Page (optional)  |                               |   | 220.00  |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  Name of COMMITTEE (in Full)  LIBERTARIAN NATIONAL COMMITTEE  Fill Name (Last, First, Middle Initial)  Buymond C. Loughtin  Maling Address 6 Wilkens Dr  Site 207  City  Site 207  City  Site 207  City  State Zip Code  Plainville  FEC 10 number of contributing feeder alpolitical committee.  Name of Employer  Alliance Electric, Inc.  Occupation  Contraction  Contraction  Contraction  Contraction  City  State Zip Code  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.24819  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.24849  Amount of Each Receipt this Period  Contribution  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.24849  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.24849  Amount of Each Receipt this Period  Contribution  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.24848  Amount of Each Receipt this Period  Electric Contributing  Transaction ID: SA11A1.24848  Amount of Each Receipt this Period  Contribution  Contributio | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 66 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17         |
|---|--|---|---|
| Regiment C. Louphin Mailing Address 6 Wilkens Dr Sie 207  City Plainville MA  02762-5019  FEC ID number of contributing federal political committee.  Name of Employer Allarice Electric, inc.  City State City  | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)   | e name and address of any political committee to                          | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Malling Address 48 Carlisle Ct  City State Old Bridge NJ 08857-2796  FEC ID number of contributing federal political committee.  Name of Employer Patterson Belknap Webb Ty- Ier  Receipt For: Primary Other (specify)  State Aggregate Year-to-Date  FEC ID number of contributing federal political committee.  Date of Receipt  Transaction ID: SA11AI.24842  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11AI.24842  Amount of Each Receipt this Period  Contribution  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Vaughan T. Lund  Mailing Address 1503 Brook Valley Ln NE  City State Atlanta GA 30324-3212  FEC ID number of contributing federal political committee.  Name of Employer Cooperative Technologies  Ngt  Aggregate Year-to-Date  Aggregate Year-to-Date  Transaction ID: SA11AI.24846  Amount of Each Receipt this Period  Contribution  Contribution  | Raymond C. Loughlin  Mailing Address 6 Wilkens Dr Ste 207  City Plainville  FEC ID number of contributing federal political committee.  Name of Employer Alliance Electric, Inc.  Receipt For: Primary General | MA 02762-5019  C Occupation Contractor Aggregate Year-to-Date ▼  250.00   | Transaction ID: SA11AI.24819  Amount of Each Receipt this Period  50.00                   |
| Name of Employer Cooperative Technologies  Receipt For:  Primary Other (specify)  Address 1503 Brook Valley Ln NE  Date of Receipt  M M M O D D O 1 2 0 0 8  Transaction ID: SA11Al.24846  Amount of Each Receipt this Period  Cocupation Mgt  Aggregate Year-to-Date ▼  250.00   | Walter Luers  Mailing Address 48 Carlisle Ct  City  Old Bridge  FEC ID number of contributing federal political committee.  Name of Employer Patterson Belknap Webb Tyler  Receipt For:  Primary General       | NJ 08857-2796  C  Occupation Attorney  Aggregate Year-to-Date ▼           | Transaction ID: SA11AI.24842  Amount of Each Receipt this Period  250.00                  |
| SUBTOTAL of Receipts This Page (optional)   | Vaughan T. Lund  Mailing Address 1503 Brook Valley Ln  City  Atlanta  FEC ID number of contributing federal political committee.  Name of Employer Cooperative Technologies  Receipt For:  Primary General     | State Zip Code GA 30324-3212  C  Occupation Mgt  Aggregate Year-to-Date ▼ | Transaction ID: SA11AI.24846  Amount of Each Receipt this Period  50.00                   |
|   | SUBTOTAL of Receipts This Page (optional)  | •   | 350.00  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | <b>(</b> )            | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 67 / 183 (check only one)    X  |
|---|-----------------------|---|---|
| Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMI | the name and add      | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Kevin J. Lynch Mailing Address PO Box 711   |                       |   | Date of Receipt   |
| City Algona FEC ID number of contributing   | State<br>IA           | Zip Code<br>50511-0711  | Transaction ID: SA11AI.24854  Amount of Each Receipt this Period                            |
| Name of Employer Declined To Answer  Receipt For:   |                       | n<br>on Requested<br>e Year-to-Date ▼   | - Contribution  |
| Primary General Other (specify)  Full Name (Last, First, Middle Initial) Ronald MacArtney   | 0 0                   | 250.00  | Date of Receipt   |
| Mailing Address 739 Franklin St   |                       |   | M M / D D / Y Y Y Y O S O O O O O O O O O O O O O O   |
| City  | State                 | Zip Code  | Transaction ID: SA11AI.24857  |
| Hinsdale  FEC ID number of contributing federal political committee.  | C                     | 60521-3614  | Amount of Each Receipt this Period  35.00   |
| Name of Employer<br>Information Requested   | Occupatio<br>Informat | n<br>on Requested   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | e Year-to-Date ▼<br>210.00  |   |
| Full Name (Last, First, Middle Initial)<br>Hardy A. Macia   | <u>'</u>              |   | Date of Receipt   |
| Mailing Address 120 Canterbury Sho  | ore Dr                |   | 05 20 7 2008  |
| City  | State                 | Zip Code  | Transaction ID: SA11AI.24861  |
| Canterbury  FEC ID number of contributing federal political committee.  | C                     | 03224-2702  | Amount of Each Receipt this Period 500.00   |
| Name of Employer<br>Self Employed   | Occupatio<br>Software | n<br>Developer  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | Year-to-Date ▼ 500.00   |   |
| SUBTOTAL of Receipts This Page (optional  | al)                   |   | 585.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 68 / 183 (check only one)    X   11a                                   |
|---|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and address of any political committee t                         | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| LIBERTARIAN NATIONAL COMMITT  | EE  |  |
| Full Name (Last, First, Middle Initial) Hardy A. Macia Mailing Address 120 Canterbury Shore                               | e Dr  | Date of Receipt  |
| City  | State Zip Code  | 0 5 2 8 2 0 0 8<br>Transaction ID: SA11AI.24862  |
| Canterbury  | NH 03224-2702   | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.  | C   | 5000.00  |
| Name of Employer<br>Self Employed   | Occupation Software Developer   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 5500.00  |  |
| Full Name (Last, First, Middle Initial)<br>David Macko  | 1   | Date of Receipt  |
| Mailing Address 28810 Cannon Rd   |   | 05 28 2008   |
| City  | State Zip Code  | Transaction ID: SA11AI.24867   |
| Solon   | OH 44139-1556   | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.  | C   | 250.00  Contribution   |
| Name of Employer<br>Retired   | Occupation Retired  |  |
| Receipt For:  | Aggregate Year-to-Date ▼  |  |
| Primary General Other (specify) ▼   | 410.00  |  |
| Full Name (Last, First, Middle Initial)<br>Roland W. Maddrey  | 1   | Date of Receipt  |
| Mailing Address 732 N Main St   |   | 05 01 YYYYY<br>2008  |
| City<br><u>Moores</u> ville   | State Zip Code NC 28115-2314  | Transaction ID: SA11AI.24870   |
| FEC ID number of contributing federal political committee.  | C 28115-2314  | Amount of Each Receipt this Period  50.00  |
| Name of Employer<br>Information Requested   | Occupation Information Requested  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 250.00   |  |
| SUBTOTAL of Receipts This Page (optional) .   | •   | 5300.00  |

| SCHEDULE A (FEC Form  | Use separate schedule(s) for each category of the Detailed Summary Page                                    | FOR LINE NUMBER: PAGE 69 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
|---|--|--|
| Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COM   | and Statements may not be sold or used by any person ng the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) David L. Maris  Mailing Address 684 Benicia Dr  City Santa Rosa  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) | State Zip Code CA 95409-3058  C  Occupation Retired  Aggregate Year-to-Date   475.00                       | Date of Receipt    M   M   Z 7   Z 0 0 8   |
| Full Name (Last, First, Middle Initial) Michael Marmel Mailing Address 1401 Letha Drive  City Springdale  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  | State Zip Code AR 72762-2056  C  Occupation  Aggregate Year-to-Date ▼                                      | Date of Receipt    M M   |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) David R. Mason Mailing Address 2234 E Crosby F  City Carrollton  FEC ID number of contributing federal political committee.  Name of Employer Verizon Wireless   | -25.00  State Zip Code TX 75006-7744  C  Occupation Telecom Engineer                                       | Date of Receipt    M M   |
| Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (option  | Aggregate Year-to-Date ▼ 1000.00   | 300.00   |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                    | FOR LINE NUMBER: PAGE 70 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
|--|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee  | son for the purpose of soliciting contributions                               |
| Full Name (Last, First, Middle Initial) Thomas P. Mathers  Mailing Address 5626 Ruatan St  City Berwyn Heights  FEC ID number of contributing federal political committee.  Name of Employer NCBFAA Inc.  Receipt For: Primary General Other (specify) | State Zip Code MD 20740-4312  C  Occupation Dircomm  Aggregate Year-to-Date ▼  250.00      | Date of Receipt    M   M   D   D   2 0 0 8                                    |
| Full Name (Last, First, Middle Initial) Quincy Matthews Mailing Address 2336 Martin Ave  City Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer SNBC  Receipt For: Primary General Other (specify)             | State Zip Code LA 70802-1430  C  Occupation Transportation  Aggregate Year-to-Date  225.00 | Date of Receipt    M  |
| Full Name (Last, First, Middle Initial) Quincy Matthews Mailing Address 2336 Martin Ave  City Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer SNBC  Receipt For: Primary General Other (specify)             | State Zip Code LA 70802-1430  C  Occupation Transportation  Aggregate Year-to-Date  325.00 | Date of Receipt    M  |
| SUBTOTAL of Receipts This Page (optional) .  |  | 250.00  |

|   | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS                                    | Use separate sche<br>for each category of<br>Detailed Summary | of the Crieck only one)   |
|---|---|---|---|
| 0 | r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and address of any political c                         | by any person for the purpose of soliciting contributions committee to solicit contributions from such committee. |
| / | Full Name (Last, First, Middle Initial)                                     | <u> </u>  |   |
| • | Michael J. McClung  Mailing Address PO Box 463                              |   | Date of Receipt   |
|   | City  | State Zip Code  | 05 16 2008 Transaction ID: SA11AI.24968   |
|   | Blackwell  FEC ID number of contributing federal political committee.       | OK 74631-0463   | Amount of Each Receipt this Period 50.00  |
|   | Name of Employer<br>Werner Enterprises                                      | Occupation Truck Driver                                       | Contribution  |
|   | Receipt For: Primary General Other (specify)                                | Aggregate Year-to-Date ▼                                      | 50.00   |
|   | Full Name (Last, First, Middle Initial) Ryan McCormick                      |   | Date of Receipt   |
|   | Mailing Address 2305 Folsom St  |   | 05 21 2008  |
|   | City  | State Zip Code  | Transaction ID: SA11AI.24977  |
|   | San Francisco FEC ID number of contributing federal political committee.    | CA 94110-2010   | Amount of Each Receipt this Period  250.00  |
|   | Name of Employer<br>Information Requested                                   | Occupation Information Requested                              | Contribution  |
|   | Receipt For:  Primary General  Other (specify) ▼                            | Aggregate Year-to-Date ▼                                      | 50.00   |
| _ | Full Name (Last, First, Middle Initial) Douglas R. McKissack                | L   | Date of Receipt   |
|   | Mailing Address 7 Bitterroot Ln   |   | 05 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|   | City<br>Savannah  | State Zip Code<br>GA 31419-9507                               | Transaction ID: SA11AI.25018  Amount of Each Receipt this Period  |
|   | FEC ID number of contributing federal political committee.                  | C   | 125.00  |
|   | Name of Employer<br>Gulfstream Aerospace                                    | Occupation<br>Engineer  | Contribution  |
|   | Receipt For:  Primary General  Other (specify) ▼                            | Aggregate Year-to-Date ▼                                      | 45.00   |
|   | SUBTOTAL of Receipts This Page (optional) .                                 |   | 425.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                           | FOR LINE NUMBER: PAGE 72 / 183 (check only one)    X   11a  |
|--|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTED  |   | erson for the purpose of soliciting contributions e to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Douglas R. McKissack Mailing Address 7 Bitterroot Ln  City Savannah  FEC ID number of contributing federal political committee.  Name of Employer Gulfstream Aerospace  Receipt For: Primary General Other (specify) | State Zip Code GA 31419-9507  C  Occupation Engineer  Aggregate Year-to-Date ▼  275.00            | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                                  |
| Full Name (Last, First, Middle Initial) Michael S. McLane  Mailing Address 215 Hancock Ln  City  Athens  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General Other (specify)   | State Zip Code GA 30605-4741  C  Occupation Information Requested  Aggregate Year-to-Date  250.00 | Date of Receipt    M M M  |
| Full Name (Last, First, Middle Initial) Guy C. McLendon Mailing Address 8011 Duffield Ln  City Houston  FEC ID number of contributing federal political committee.  Name of Employer Gitgo Petroleum Corp.  Receipt For: Primary General Other (specify)     | State Zip Code TX 77071-2016  C  Occupation Engineer  Aggregate Year-to-Date ▼  305.00            | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                    |
| SUBTOTAL of Receipts This Page (optional)  |   | 95.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                           | FOR LINE NUMBER: PAGE 73 / 183 (check only one)    X   11a                                |
|--|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  |   | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Guy C. McLendon  Mailing Address 8011 Duffield Ln  City Houston  FEC ID number of contributing federal political committee.  Name of Employer Gitgo Petroleum Corp.  Receipt For: Primary General Other (specify)        | State Zip Code TX 77071-2016  C Occupation Engineer Aggregate Year-to-Date  405.00                | Date of Receipt    M  |
| Full Name (Last, First, Middle Initial) Gregory A. Meckling Mailing Address 19115 14th Ct NW  City Shoreline  FEC ID number of contributing federal political committee.  Name of Employer Turner Construction  Receipt For:  Primary General Other (specify) ▼  | State Zip Code WA 98177-2756  C  Occupation Engineer  Aggregate Year-to-Date ▼                    | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| Full Name (Last, First, Middle Initial) Andrew L. Messenger  Mailing Address 10634 Moshie Ln  City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) | State Zip Code FL 33576-7965  C  Occupation Information Requested  Aggregate Year-to-Date  700.00 | Date of Receipt    M  |
| SUBTOTAL of Receipts This Page (optional)  |   | 350.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | .)                          | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 74 / 183   (check only one) |
|---|-----------------------------|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may            | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions      |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMIT                                   |                             |   |   |
| Full Name (Last, First, Middle Initial) Louis Misko                                       |                             |   | Date of Receipt                                     |
| Mailing Address 4317 Argos Dr   |                             |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y         |
| City<br>San Diego   | State<br>CA                 | Zip Code<br>92116-2329  | Transaction ID: SA11AI.25117                        |
| FEC ID number of contributing federal political committee.                                | C                           | 92110-2329  | Amount of Each Receipt this Period  100.00          |
| Name of Employer<br>US Navy   | Occupatio<br>Engineer       |   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                   | e Year-to-Date ▼ 400.00   |   |
| Full Name (Last, First, Middle Initial)<br>Stephen W. Modzelewski                         |                             |   | Date of Receipt                                     |
| Mailing Address 1578 River Rd   |                             |   | 0 5 0 1 0 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>New Hope  | State<br>PA                 | Zip Code<br>18938-9267  | Transaction ID: SA11AI.25123                        |
| FEC ID number of contributing federal political committee.                                | C                           | 10930-9207  | Amount of Each Receipt this Period 75.00            |
| Name of Employer<br>The Watermard Group   | Occupatio                   | n<br>er Programmer  | Contribution  |
| Receipt For:  Primary  General  Other (specify) ▼   | <del>_ , ' _ · _ · _ </del> | e Year-to-Date ▼ 375.00   |   |
| Full Name (Last, First, Middle Initial)   |                             |   | Date of Receipt                                     |
| Mailing Address PO Box 177  |                             |   | 0 5 1 6 2 0 0 8                                     |
| City<br>Challenge   | State                       | Zip Code<br>95925-0177  | Transaction ID: SA11AI.25134                        |
| FEC ID number of contributing federal political committee.                                | CA                          | 95925-0177  | Amount of Each Receipt this Period 75.00            |
| Name of Employer<br>Bill Moore & Assoc.   | Occupatio<br>Arch.          | n   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                   | e Year-to-Date ▼<br>250.00  |   |
| SUBTOTAL of Receipts This Page (optional  | \                           |   | 250.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                    | FOR LINE NUMBER: PAGE 75 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and<br>or for commercial purposes, other than using th                          | Statements may not be sold or used by any pere name and address of any political committee | son for the purpose of soliciting contributions                               |
| NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE  LIBERTARIAN NATIONAL COMMITTEE  NAME OF COMMITTEE (In Full) | EE   |   |
| Full Name (Last, First, Middle Initial)  Melinda Moore  Mailing Address 827 Anthony Ct SE                                |  | Date of Receipt   |
| City   | State Zip Code   | 0 5 1 9 2 0 0 8 Transaction ID: SA11Al.25149                                  |
| Leesburg   | VA 20175-5629  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C  | 83.34   |
| Name of Employer<br>Catholic University of America   | Occupation<br>Instructor   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 1310.02   |   |
| Full Name (Last, First, Middle Initial) Melinda Moore  |  | Date of Receipt   |
| Mailing Address 827 Anthony Ct SE  |  | 05 28 7 2008  |
| City   | State Zip Code   | Transaction ID: SA11AI.25150  |
| Leesburg   | VA 20175-5629  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C  | 5000.00  Contribution   |
| Name of Employer<br>Catholic University of America   | Occupation Instructor  | Contribution  |
| Receipt For:   | Aggregate Year-to-Date ▼   |   |
| Primary General Other (specify) ▼  | 6310.02  |   |
| Full Name (Last, First, Middle Initial)<br>Robert Moore  |  | Date of Receipt   |
| Mailing Address 398 Plains Rd  |  | 05 01 YYYYY<br>05 01 2008   |
| City   | State Zip Code   | Transaction ID: SA11AI.25151  |
| Lisbon   | NH 03585-6923  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C  | 47.00 Contribution  |
| Name of Employer<br>Solid Earth, Inc.  | Occupation<br>Geographer   | Continuation  |
| Receipt For:   | Aggregate Year-to-Date ▼   |   |
| Primary General Other (specify) ▼  | 235.00   |   |
| SUBTOTAL of Receipts This Page (optional)  | I  | 5130.34   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                                   | FOR LINE NUMBER: PAGE 76 / 183 (check only one)    X                                     |
|---|---|--|
| Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMM  | nd Statements may not be sold or used by any person<br>the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Ronald G. Moore Mailing Address 208 E 13th St Apt 3  City New York  | 3F<br>State Zip Code<br>NY 10003-5604   | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                         |
| FEC ID number of contributing federal political committee.  Name of Employer Marketing Technologies Group Receipt For: Primary General Other (specify)  | Occupation Computer Consultant Aggregate Year-to-Date  400.00   | 30.00<br>Contribution  |
| Full Name (Last, First, Middle Initial) Chuck Moulton Mailing Address 418 S 3rd St Apt 6  City San Jose  FEC ID number of contributing federal political committee.  Name of Employer Villanova Law School  Receipt For: Primary General Other (specify)          | State Zip Code CA 95112-5716  C  Occupation Student  Aggregate Year-to-Date   600.00                      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                           |
| Full Name (Last, First, Middle Initial) George W. Mowbray Mailing Address 3649 Burton Ln  City Lake Charles  FEC ID number of contributing federal political committee.  Name of Employer Lake Charles Pilots, Inc.  Receipt For: Primary General Other (specify) | State Zip Code LA 70605-1025  C  Occupation River Pilot  Aggregate Year-to-Date  750.00                   | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                         |
| SUBTOTAL of Receipts This Page (options   | al)   | 280.00   |

| Any information copied from such Reports and Statements may not be add or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  LIBERTARIAN NATIONAL COMMITTEE  Full Name (Last, First, Middle Initial)  William in Municy  Mailing Address 9334 S St  City  State  Zip Code  Raiston  NE 68127.3435  FEC ID number of contributing lederal political committee.  Contribution  Primary General  Other (specify) ▼  Name of Engloyer  City  Name (Last, First, Middle Initial)  Other (specify) ▼  Name of Engloyer  City  State  Zip Code  Name of Engloyer  Contribution  Date of Receipt  Aggregate Year-to-Date ▼  Name of Engloyer  Contribution  Date of Receipt  Aggregate Year-to-Date  Transaction ID: SA11A1.25224  Amount of Each Receipt this Period  Transaction ID: SA11A1.25224  Amount of Each Receipt in Period  Contribution  Date of Receipt  Contribution  Date of Receipt  Contribution  Contribution  Contribution  Date of Receipt  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.25224  Amount of Each Receipt this Period  Transaction ID: SA11A1.25224  Amount of Each Receipt in Period  Transaction ID: SA11A1.25224  Amount of Each Receipt in Period  Transaction ID: SA11A1.25224  Amount of Each Receipt in Period  Full Name (Last, First, Middle Initial)  Sim L. O'bell  Malling Address 775 Shady Oaks Cir  City  State  Zip Code  MS 38855-5459  FEC ID number of contributing  federal political committee.  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.25221  Amount of Each Receipt his Period  Teach Receipt Fire:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.25221  Amount of Each Receipt his Period  Teach Receipt Fire:  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.25221  Amount of Each Receipt his Period  Teach Receipt Fire  Aggregate Year-to-Date ▼  Teach Receipt Fire  Aggregate Year-to-Date ▼  Teach R | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page         | FOR LINE NUMBER: PAGE 77 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
|---|--|---|--|
| William F. Murley   Mailing Address 9334 S St   | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)   | e name and address of any political committee to                                | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Cynthia L. Myers  Mailing Address 111 Elmwood Ave  City State PA 19072-2409 FEC ID number of contributing federal political committee.  Name of Employer Paul, Reich & Myers, P.C.  Primary Other (specify)  State Zip Code PA 19072-2409 Amount of Each Receipt this Period  Contribution  Contribution  Contribution  Date of Receipt  M M M C D D C D C D C D C D C D C D C D  | William F. Murley  Mailing Address 9334 S St  City  Ralston  FEC ID number of contributing federal political committee.  Name of Employer City of Tarpon Springs  Receipt For:  Primary General          | NE 68127-3435  C  Occupation Water Treatment Plant Ope Aggregate Year-to-Date ▼ | Transaction ID: SA11AI.25215  Amount of Each Receipt this Period  37.95                  |
| Stan L. O'Dell  Mailing Address 775 Shady Oaks Cir  City State Zip Code Oxford MS 38655-5450  FEC ID number of contributing federal political committee.  Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M O 5 / 28 / 2008  Transaction ID: SA11AI.25321  Amount of Each Receipt this Period  Contribution  Contribution   | Cynthia L. Myers  Mailing Address 111 Elmwood Ave  City  Narberth  FEC ID number of contributing federal political committee.  Name of Employer Paul, Reich & Myers, P.C.  Receipt For:  Primary General | PA 19072-2409  C Occupation Attorney  Aggregate Year-to-Date                    | Transaction ID: SA11AI.25224  Amount of Each Receipt this Period  200.00                 |
| SUBTOTAL of Receipts This Page (optional)   | Stan L. O'Dell  Mailing Address 775 Shady Oaks Cir  City Oxford  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General                | MS 38655-5450  C Occupation Retired Aggregate Year-to-Date                      | Transaction ID: SA11AI.25321  Amount of Each Receipt this Period  1000.00                |
|   | SUBTOTAL of Receipts This Page (optional)  | · • • • • • • • • • • • • • • • • • • •   | 1237.95  |

|               | HEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                      | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 78 / 183 (check only one)    X  |
|---------------|---|----------------------|---|---|
| or fo         | rinformation copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITT  | e name and ad        | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| . <u> </u>    | Full Name (Last, First, Middle Initial) Martin Ohlsen Mailing Address 2594 Leopold Way Ap City Sun Prairie FEC ID number of contributing rederal political committee.  Name of Employer Tek Systems | State<br>WI<br>C     |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| _             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼ 400.00   |   |
| i. <u>I</u>   | Full Name (Last, First, Middle Initial)<br>Martin Ohlsen<br>Mailing Address 2594 Leopold Way Ap   | ot. 112              |   | Date of Receipt  0 5 1 5 2 0 0 8  |
| (             | City  | State                | Zip Code  | Transaction ID: SA11AI.25328  |
| 3             | Sun Prairie   | WI                   | 53590-0000  | Amount of Each Receipt this Period  |
|               | FEC ID number of contributing dederal political committee.  | C                    |   | 25.00   |
| _             | Name of Employer<br>Tek Systems   | Occupation IT Consu  |   | Contribution  |
| ı             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>425.00  |   |
|               | Full Name (Last, First, Middle Initial)<br>Wilfred W. Olschewski  | Date of Receipt      |   |   |
| 1             | Mailing Address 411 Walnut St # 1844  |                      |   | 05 27 2008  |
|               | City  | State                | Zip Code  | Transaction ID: SA11AI.25338  |
| F             | Green Cove Springs FEC ID number of contributing rederal political committee.   | C                    | 32043-3443  | Amount of Each Receipt this Period  1000.00   |
| <u>1</u><br>1 | Name of Employer<br>Retired CEO   | Occupation Retired ( |   | Contribution  |
| Ī             | Receipt For: Primary General Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1000.00   |   |
| en            | BTOTAL of Receipts This Page (optional)   | 1                    |   | 1125.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page              | FOR LINE NUMBER: PAGE 79 / 183 (check only one)    X   11a                                    |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee t                                      | son for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Steven R. Osborne  Mailing Address 412 River Oaks Dr  City Luling  | State Zip Code<br>LA 70070-2144  | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                              |
| FEC ID number of contributing federal political committee.  Name of Employer The Dow Chemical Company  Receipt For:  Primary General Other (specify)   | Occupation Chemical Engineer  Aggregate Year-to-Date ▼  250.00                       | Contribution  |
| Full Name (Last, First, Middle Initial) Steven R. Osborne  Mailing Address 412 River Oaks Dr  City Luling  FEC ID number of contributing federal political committee.  Name of Employer The Dow Chemical Company  Receipt For: Primary General | State Zip Code LA 70070-2144  C  Occupation Chemical Engineer Aggregate Year-to-Date | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| Other (specify) ▼  Full Name (Last, First, Middle Initial) Christian Padgett  Mailing Address 560 N Erie Ave  City Lindenhurst  FEC ID number of contributing federal political committee.   | State Zip Code NY 11757-3441  C  | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y                              |
| Name of Employer US Postal Service  Receipt For:  Primary General  Other (specify) ▼   | Occupation Letter Carrier  Aggregate Year-to-Date ▼  290.00                          |   |
| SUBTOTAL of Receipts This Page (optional)  |  | 340.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                            | FOR LINE NUMBER: PAGE 80 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16   |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee t  | son for the purpose of soliciting contributions to solicit contributions from such committee.   |
| Full Name (Last, First, Middle Initial)  Ewart Matthew Padgett  Mailing Address 54 W Bel Air Blvd  City  Clarksville  FEC ID number of contributing federal political committee.  Name of Employer Clarksville Foundry, Inc.  Receipt For:  Primary General  Other (specify) | State Zip Code TN 37042-4060  C  Occupation Vice President  Aggregate Year-to-Date  225.00         | Date of Receipt    M   M   D   D   2 0 0 8   Transaction ID: SA11AI.25371   Amount of Each Receipt this Period   40.00   Contribution |
| Full Name (Last, First, Middle Initial) Donald M. Parrish  Mailing Address 5207 Florence Ave  City  Downers Grove  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General Other (specify)         | State Zip Code IL 60515-5206  C  Occupation Information Requested  Aggregate Year-to-Date   500.00 | Date of Receipt    M   M   28   2008  |
| Full Name (Last, First, Middle Initial) Arjen Peirce  Mailing Address 3001 Coleridge Rd  City Cleveland  FEC ID number of contributing federal political committee.  Name of Employer Calix  Receipt For: Primary General Other (specify)                                    | State Zip Code OH 44118-3526  C  Occupation Sales  Aggregate Year-to-Date  210.00                  | Date of Receipt    M   M   D   D   2 0 0 8  |
| SUBTOTAL of Receipts This Page (optional) .  |  | 575.00  |

|      | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   |                                   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 81 / 183 (check only one)    X  |
|------|---|-----------------------------------|---|---|
|      | Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTI   | name and add                      | y not be sold or used by any person<br>dress of any political committee to    | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| <br> | Full Name (Last, First, Middle Initial) Michele R. Poague Mailing Address 21079 E Mineral Dr  City Aurora  FEC ID number of contributing federal political committee.  Name of Employer Bavaria Inn | State<br>CO<br>C                  |   | Date of Receipt    M   M   D   D   2 0 0 8  |
|      | Receipt For: Primary General Other (specify)  | ,                                 | e Year-to-Date ▼ 300.00   |   |
| 3.   | Full Name (Last, First, Middle Initial) Robert Pollard  Mailing Address 11150 S 1501 Rd   |                                   |   | Date of Receipt  0 5 1 5 2 0 0 8  |
|      | City Stockton  FEC ID number of contributing federal political committee.   | State<br>MO                       | Zip Code<br>65785-9164  | Transaction ID: SA11AI.25508  Amount of Each Receipt this Period  75.00                     |
|      | Name of Employer Retired  Receipt For: Primary General Other (specify)  | Occupatio<br>Retired<br>Aggregate | e Year-to-Date ▼ 225.00   | Contribution  |
|      | Full Name (Last, First, Middle Initial) Pamela P. Potter  Mailing Address 538 Spring Place Rd N   | I<br>NE                           |   | Date of Receipt   |
|      | City White FEC ID number of contributing  | State<br>GA                       | Zip Code<br>30184-2232  | Transaction ID: SA11AI.25526  Amount of Each Receipt this Period  500.00                    |
|      | federal political committee.  Name of Employer Retired  | Occupatio<br>Retired              | n   | Contribution  |
|      | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                         | e Year-to-Date ▼ 2000.00  |   |
|      | SUBTOTAL of Receipts This Page (optional)   | 1                                 | <b>)</b>  | 650.00  |

| SCHEDULE A (FEC Form 3X)<br>TEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page              | FOR LINE NUMBER: PAGE 82 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16                     |
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| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  |  | erson for the purpose of soliciting contributions e to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Robert N. Power  Mailing Address 1 Saint Francis PI Ap  City San Francisco  FEC ID number of contributing federal political committee.  Name of Employer Vintara By Way of GevityHR  Receipt For: Primary General Other (specify) |  | Date of Receipt    M  |
| Full Name (Last, First, Middle Initial) Earl Prochaska  Mailing Address 8 Lauretta Dr  City Highland  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                                  | State Zip Code NY 12528-1006  C  Occupation Retired  Aggregate Year-to-Date  340.00  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                      |
| Full Name (Last, First, Middle Initial) Earl Prochaska Mailing Address 8 Lauretta Dr  City Highland  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)                                   | State Zip Code NY 12528-1006  C  Occupation Retired  Aggregate Year-to-Date   400.00 | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                      |
| SUBTOTAL of Receipts This Page (optional)   |  | 245.00  |

|     | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   | fo                                     | Ise separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 83 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 1             |
|-----|--|--|--|---|
| Z C | ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | e name and address                     | be sold or used by any persons of any political committee to                 | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|     | Full Name (Last, First, Middle Initial) Earl Prochaska Mailing Address 8 Lauretta Dr City  |  | Zip Code   | Date of Receipt  05 23 2008  Transaction ID: SA11AI.25553                                   |
|     | Highland  FEC ID number of contributing federal political committee.   | NY C                                   | 12528-1006   | Amount of Each Receipt this Period 50.00  |
|     | Name of Employer Retired  Receipt For:  Primary General Other (specify) ▼  | Occupation<br>Retired<br>Aggregate Yea | r-to-Date ▼<br>450.00  | Contribution  |
|     | Full Name (Last, First, Middle Initial) Nick Rajnovic  Mailing Address 8976 33rd Ave   |  |  | Date of Receipt  05 01 01 2008  |
|     | City   | State                                  | Zip Code   | Transaction ID: SA11AI.25579  |
|     | Kenosha FEC ID number of contributing  | WI                                     | 53142-5410   | Amount of Each Receipt this Period  |
|     | federal political committee.   | C                                      |  | 60.00  Contribution   |
|     | Name of Employer<br>Deltrol Controls   | Occupation Electrical En               | gineer   | Contribution  |
|     | Receipt For:  Primary General  Other (specify) ▼   | Aggregate Yea                          | r-to-Date ▼ 240.00   |   |
| _   | Full Name (Last, First, Middle Initial) Thomas Ratts   |  |  | Date of Receipt   |
|     | Mailing Address 125 56th Ave S Apt 1   | 48                                     |  | 05 15 2008  |
|     | City   | State<br>FL                            | Zip Code   | Transaction ID: SA11AI.25596  |
|     | Saint Petersburg  FEC ID number of contributing federal political committee.   | C                                      | 33705-5462   | Amount of Each Receipt this Period 250.00   |
|     | Name of Employer<br>Retired  | Occupation<br>Retired                  |  | Contribution  |
|     | Receipt For:  Primary General  Other (specify) ▼   | Aggregate Yea                          | r-to-Date ▼<br>275.00  |   |
|     | SUBTOTAL of Receipts This Page (optional)  | 1                                      |  | 360.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 84 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17         |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Tom Regnier Mailing Address 7000 Bonita Dr Apt 50  City Miami Beach FEC ID number of contributing federal political committee.  Name of Employer Univ of Miami  Receipt For: Primary General Other (specify)   | State Zip Code FL 33141-3103  C  Occupation Information Requested  Aggregate Year-to-Date  350.00  | Date of Receipt    M   |
| Full Name (Last, First, Middle Initial) John H. Ring Mailing Address 2901 Oakdale Rd  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) | State Zip Code NC 28216-1476  C  Occupation Information Requested  Aggregate Year-to-Date ▼  225.00  | Date of Receipt    M   |
| Full Name (Last, First, Middle Initial) Paul D. Rolig Mailing Address 9877 W Ripley St  City Boise  FEC ID number of contributing federal political committee.  Name of Employer Semi-Retired  Receipt For: Primary General Other (specify)            | State Zip Code ID 83704-2758  C  Occupation Software Engineer  Aggregate Year-to-Date ▼  600.00  | Date of Receipt    M   |
| SUBTOTAL of Receipts This Page (optional)  |  | 295.00   |

|    | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |   | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 85 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 1             |
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| An | y information copied from such Reports and<br>for commercial purposes, other than using th<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITT                                  | ne name and ad                                      | y not be sold or used by any persidress of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|    | Full Name (Last, First, Middle Initial) Robert Scott Rose Mailing Address 2208 Kelly Rd  City Apex  FEC ID number of contributing federal political committee.  Name of Employer IBM Corp. | State NC C  | Zip Code<br>27502-9562  | Date of Receipt  M M M  |
| _  | Receipt For:  Primary General  Other (specify) ▼   |   | F Specialist e Year-to-Date ▼ 250.00                                    |   |
| i. | Full Name (Last, First, Middle Initial) Thomas Rose Mailing Address 1503 Morgan Road, F  | PO Box 518  |   | Date of Receipt  M M O D D O D O D O D O D O D O D O D O                                    |
|    | City   | State   | Zip Code  | Transaction ID: SA11AI.25736  |
|    | Benson FEC ID number of contributing federal political committee.  | NC C  | 27504-0518  | Amount of Each Receipt this Period  85.00   |
|    | Name of Employer<br>L J Rogers Jr  | of Employer Occupation gers Jr transportation       |   | Contribution  |
|    | Receipt For:  Primary General  Other (specify) ▼   | _ ' _ ' ' _   | e Year-to-Date ▼ 425.00   |   |
|    | Full Name (Last, First, Middle Initial) David P. Ruby  |   |   | Date of Receipt   |
|    | Mailing Address 1119 E Le Marche Av  | /e  |   | 05 01 2008  |
|    | City   | State   | Zip Code  | Transaction ID: SA11AI.25751  |
|    | Phoenix  | AZ  | 85022-3136  | Amount of Each Receipt this Period  |
|    | FEC ID number of contributing federal political committee.   | C   |   | 100.00  |
|    | Name of Employer<br>Phoenix Emergency Physici-<br>an In  | <del>, '                                     </del> | ncy Physician   | Contribution  |
|    | Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | e Year-to-Date ▼ 500.00   |   |
|    | UBTOTAL of Receipts This Page (optional)   |   |   | 285.00  |

|  | for each category of the Detailed Summary Page   | (check only one)    X   11a   |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Susan S. Ruch Mailing Address 5 Cuesta Ln  City Santa Fe  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)               | State Zip Code NM 87508-8331  C  Occupation Ranching, Real Estate Investments  Aggregate Year-to-Date   400.00 | Date of Receipt    M   M   D   D   2 0 0 8  |
| Full Name (Last, First, Middle Initial) Chris J. Rufer  Mailing Address 724 Main St  City Woodland  FEC ID number of contributing federal political committee.  Name of Employer The Morning Star Company  Receipt For: Primary General Other (specify)  | State Zip Code CA 95695-3407  C  Occupation Agriculturalist  Aggregate Year-to-Date  7000.00                   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| Full Name (Last, First, Middle Initial) Sammy Sabri  Mailing Address 4038 Lambert Ter  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) | State Zip Code AL 35242-7489  C  Occupation Information Requested  Aggregate Year-to-Date  250.00              | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| SUBTOTAL of Receipts This Page (optional)  | ·<br>  | 7150.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 87 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 11 |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  |  | y not be sold or used by any perso<br>dress of any political committee to     |  |
| Full Name (Last, First, Middle Initial) P. Michael Saint Mailing Address 6640 Carothers Parkw  City Franklin  FEC ID number of contributing federal political committee.  Name of Employer The Saint Consulting Group  Receipt For: Primary General Other (specify)    | State TN  C  Occupation CEO & C              | Zip Code<br>37067-0000  | Date of Receipt    M M   |
| Full Name (Last, First, Middle Initial) John A. Salvette  Mailing Address 2016 Devonshire Rd  City Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer Hayes Lemmerez International Receipt For: Primary General Other (specify)   | State MI  C  Occupation Vice Pres  Aggregate |   | Date of Receipt    M M   |
| Full Name (Last, First, Middle Initial) John A. Salvette  Mailing Address 2016 Devonshire Rd  City Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer Hayes Lemmerez International  Receipt For:  Primary General Other (specify) | State MI  C  Occupation Vice Pres            |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                   |
| SUBTOTAL of Receipts This Page (optional)  | •  |   | 6050.00  |

| SCHEDULE A (FEC F ITEMIZED RECEIPTS  | orm 3X)                     | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 88 / 183 (check only one)    X  |
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| Any information copied from such or for commercial purposes, other  NAME OF COMMITTEE (In FI  LIBERTARIAN NATIONAL | than using the name and add | not be sold or used by any persor<br>ress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle I Jason H. Sanderson Mailing Address PO Box 87                                      |                             | Zip Code  | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y                    |
| Madison  FEC ID number of contributing federal political committee.  | NH C                        | 03849-0087  | Amount of Each Receipt this Period  1000.00   |
| Name of Employer Liberal Catholic Church, Int. Diocese Receipt For:  Primary General Other (specify) ▼             |                             | Year-to-Date ▼<br>1025.00   | Contribution  |
| Full Name (Last, First, Middle I<br>John Sauter<br>Mailing Address 9 Elizabetl                                     |                             |   | Date of Receipt  0 5 1 5 2 0 0 8  |
| City   | State                       | Zip Code  | Transaction ID: SA11AI.25831  |
| <u>Merrimack</u>   | NH                          | 03054-4576  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C                           |   | 250.00  Contribution  |
| Name of Employer<br>Town of Hudson   | Occupation Computer         | r Operator  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   |                             | Year-to-Date ▼ 250.00   |   |
| George Savage  |                             |   |   |
| City   | State                       | Zip Code  | 0 5 2 2 2 0 0 8<br>Transaction ID: SA11Al.25833   |
| Henderson  | NV                          | 89052-6906  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C                           |   | 250.00  |
| Name of Employer<br>Information Requested  | Occupation<br>Information   | on Requested  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   |                             | Year-to-Date ▼ 250.00   |   |
| SUBTOTAL of Receipts This Pa   | ne (ontional)               |   | 1500.00   |

|           | HEDULE A (FEC Form 3X)  MIZED RECEIPTS   |                         | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 89 / 183   (check only one) |
|-----------|--|-------------------------|---|---|
| Any or fo | information copied from such Reports and St<br>r commercial purposes, other than using the | atements may            | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions      |
| <b>\</b>  | IAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTE                                  | Ε                       |   |   |
|           | Full Name (Last, First, Middle Initial)  |                         |   | Date of Receipt                                     |
| _         | Mailing Address 307 Trinity Ct Apt 7   |                         |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y         |
| C         | Dity   | State                   | Zip Code  | Transaction ID: SA11AI.25841                        |
| <u> </u>  | Princeton  | NJ                      | 08540-7027  | Amount of Each Receipt this Period                  |
|           | EC ID number of contributing ederal political committee.                                   | C                       |   | 500.00  |
| N         | lame of Employer<br>Vachovia Securities  | Occupation<br>Financial |   | Contribution  |
| F         | Receipt For:  Primary General  Other (specify) ▼   | Aggregate               | Year-to-Date ▼ 500.00   |   |
|           | Full Name (Last, First, Middle Initial) Steven Schoch                                      |                         |   | Date of Receipt                                     |
| _         | Mailing Address 974 Bluebonnet Dr  |                         |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y         |
|           | City   | State                   | Zip Code  | Transaction ID: SA11AI.25857                        |
| 5         | Sunnyvale  | CA                      | 94086-6756  | Amount of Each Receipt this Period                  |
|           | EC ID number of contributing ederal political committee.                                   | C                       |   | 45.00   |
| N         | lame of Employer<br>StarNet Communications Co-   | Occupation Software     | n<br>Engineer   | Contribution  |
| F         | Receipt For:   | Aggregate               | e Year-to-Date ▼  |   |
|           | Primary General Other (specify)  |                         | 325.00  |   |
|           | Full Name (Last, First, Middle Initial) David K. Schrader                                  |                         |   | Date of Receipt                                     |
| _         | Mailing Address 50 17th St # A   |                         |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y         |
|           | City   | State                   | Zip Code  | Transaction ID: SA11AI.25860                        |
| _         | Hermosa Beach  | CA                      | 90254-3408  | Amount of Each Receipt this Period                  |
|           | EC ID number of contributing ederal political committee.                                   | C                       |   | 50.00   |
| _         | lame of Employer<br>AT&T NCR   | Occupation Compute      | n<br>er R&D Manager   | Contribution  |
| F         | Receipt For:   | Aggregate               | e Year-to-Date ▼  |   |
|           | Primary General Other (specify) ▼  |                         | 225.00  |   |
|           | BTOTAL of Receipts This Page (optional)  |                         |   | 595.00  |

|                | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                     | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 90 / 183 (check only one)    X  |
|----------------|--|---------------------|---|---|
| Ar             | ny information copied from such Reports and S<br>for commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMITTE | name and ad         | y not be sold or used by any persondress of any political committee to  | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| <u>∠</u><br>\. | Full Name (Last, First, Middle Initial) Jim Seely Mailing Address 456 Montgomery St St   | e 1200              |   | Date of Receipt  0 5 2 7 2 0 0 8  |
|                | City   | State               | Zip Code  | Transaction ID: SA11AI.25919  |
|                | San Francisco  | CA                  | 94104-1264  | Amount of Each Receipt this Period  |
|                | FEC ID number of contributing federal political committee.   | С                   |   | 250.00  |
|                | Name of Employer<br>Association Legal Services   | Occupation Attorney | n   | Contribution  |
|                | Receipt For:  Primary General  Other (specify) ▼   | Aggregate           | e Year-to-Date ▼<br>250.00  | ]   |
| <br>3.         | Full Name (Last, First, Middle Initial) John R. Seydel Mailing Address 1027 Peachtree Battle   | A. (2. NI)A/        |   | Date of Receipt   |
|                | Mailing Address 1027 Peachtree Battle  | 05 14 2008          |   |   |
|                | City   | State               | Zip Code  | Transaction ID: SA11AI.25943  |
|                | Atlanta  | GA                  | 30327-1317  | Amount of Each Receipt this Period  |
|                | FEC ID number of contributing federal political committee.   | C                   |   | 500.00  |
|                | Name of Employer<br>Retired  | Occupation Retired  | n   | Contribution  |
|                | Receipt For:  Primary General  Other (specify) ▼   | Aggregate           | e Year-to-Date ▼ 500.00   | ]   |
|                | Full Name (Last, First, Middle Initial)<br>Thomas J. Shepard   |                     |   | Date of Receipt   |
|                | Mailing Address 3378 Black Willow Trl  |                     |   | 05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                | City   | State               | Zip Code  | Transaction ID: SA11AI.25962  |
|                | Deland  FEC ID number of contributing federal political committee.   | FL<br>C             | 32724-3431  | Amount of Each Receipt this Period  50.00   |
|                | Name of Employer<br>Information Requested  | Occupatio           | n<br>ion Requested  | Contribution  |
|                | Receipt For:  Primary General  Other (specify) ▼   |                     | e Year-to-Date ▼<br>250.00  |   |
|                | UBTOTAL of Receipts This Page (optional)   | ı                   |   | 800.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                            | FOR LINE NUMBER: PAGE 91 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | Statements may not be sold or used by any pers<br>he name and address of any political committee t | on for the purpose of soliciting contributions                                |
| Full Name (Last, First, Middle Initial) Phillip Showers  Mailing Address 1900 Dunham Cir N  | W  | Date of Receipt   |
| City  Huntsville  FEC ID number of contributing federal political committee.  | State Zip Code AL 35816-1743   | Transaction ID: SA11AI.25967  Amount of Each Receipt this Period  50.00       |
| Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) ▼  | Occupation Information Requested Aggregate Year-to-Date  250.00                                    | Contribution  |
| Full Name (Last, First, Middle Initial) John Shuey Mailing Address 4457 Young Dr  |  | Date of Receipt  0 5 2 9 2 0 0 8  |
| City Carrollton  FEC ID number of contributing federal political committee.   | State Zip Code<br>TX 75010-1145  | Transaction ID: SA11AI.25969  Amount of Each Receipt this Period  100.00      |
| Name of Employer Retired  Receipt For: Primary Other (specify)  | Occupation Retired  Aggregate Year-to-Date ▼  225.00   | Contribution  |
| Full Name (Last, First, Middle Initial) Robert Shuford Mailing Address 6 Whartons Way   |  | Date of Receipt   |
| City Hampton FEC ID number of contributing federal political committee.   | State Zip Code VA 23669-1094   | Transaction ID: SA11AI.25970  Amount of Each Receipt this Period  85.00       |
| Name of Employer Old Point National Bank  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼   | Occupation Information Systems banki Aggregate Year-to-Date   625.00                               | Contribution  |
| SUBTOTAL of Receipts This Page (optional)   |  | 235.00  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                          | FOR LINE NUMBER: PAGE 92 / 183 (check only one)    X |  |
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| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions       |  |
| /   |  |  |  |
| Full Name (Last, First, Middle Initial) Robert Shuford Mailing Address 6 Whartons Way   |  | Date of Receipt                                      |  |
| City  | State Zip Code   | 0 5 2 8 2 0 0 8 Transaction ID: SA11AI.25971         |  |
| <u>Hampton</u>  | VA 23669-1094  | Amount of Each Receipt this Period                   |  |
| FEC ID number of contributing federal political committee.  | C  | 250.00   |  |
| Name of Employer<br>Old Point National Bank   | Occupation Information Systems banki   | Contribution   |  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 875.00  |  |  |
| Full Name (Last, First, Middle Initial)<br>Robban A. Sica   |  | Date of Receipt                                      |  |
| Mailing Address 37 Lakewood Dr  |  | 05 01 7 2008   |  |
| City  | State Zip Code   | Transaction ID: SA11AI.25973                         |  |
| Trumbull  | CT 06611-2446  | Amount of Each Receipt this Period                   |  |
| FEC ID number of contributing federal political committee.  | C  | 100.00   |  |
| Name of Employer<br>Center for the Healing Ar-<br>t, PC   | Occupation Physician   | Contribution   |  |
| Receipt For:  | Aggregate Year-to-Date ▼   |  |  |
| Primary General Other (specify) ▼   | 600.00   |  |  |
| Full Name (Last, First, Middle Initial)<br>Manpreet Sidhu   |  | Date of Receipt                                      |  |
| Mailing Address 404 N Van Buren St  |  | 05 16 2008   |  |
| City  | State Zip Code   | Transaction ID: SA11AI.25974                         |  |
| Falls Church  | VA 22046-3657  | Amount of Each Receipt this Period                   |  |
| FEC ID number of contributing federal political committee.  | C  | 200.00  Contribution                                 |  |
| Name of Employer<br>Cisco   | Occupation Sales Specialist  | Continuation   |  |
| Receipt For:  | Aggregate Year-to-Date ▼   | _  |  |
| Primary General Other (specify) ▼   | 225.00   |  |  |
| CURTOTAL of Descipts This Page (antional)   |  | 550.00   |  |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   |   | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 93 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16             |
|---|---|---|---|
| Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTE  |   | ot be sold or used by any personses of any political committee to       | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Richard Skorheim  Mailing Address 3899 Haines St Apt 8-2  City San Diego  FEC ID number of contributing federal political committee.  Name of Employer Sun Microsystems, Inc.  Receipt For: Primary General Other (specify) | State CA  C Occupation Engineer                 | Zip Code<br>92109-6355<br>gear-to-Date ▼ 250.00                         | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| Full Name (Last, First, Middle Initial) Lloyd E. Smith Mailing Address 21 Franklin Ave  City Oswego  FEC ID number of contributing federal political committee.  Name of Employer HYCO Tunnel & Sewer Co.  Receipt For: Primary General Other (specify)             | State NY  C  Occupation Land Spec Aggregate Y   | Zip Code 13126-1755  ulator /ear-to-Date ▼ 500.00                       | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| Full Name (Last, First, Middle Initial) Clifford B. Sondock Mailing Address 6 Crane Rd  City Huntington FEC ID number of contributing federal political committee.  Name of Employer Spiegel Assoc.  Receipt For: Primary General Other (specify)                   | State NY  C  Occupation Real Estate Aggregate Y | Zip Code<br>11743-1733<br>e<br>gear-to-Date ▼                           | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| SUBTOTAL of Receipts This Page (optional)   |   |   | 250.00  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | <b>(</b> )                           | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only one)    X   11a                                      |
|--|--------------------------------------|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using | d Statements may<br>the name and add | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions                   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMI                                   |                                      |   |  |
| Full Name (Last, First, Middle Initial) Hans O. Sorensen                                 |                                      |   | Date of Receipt  |
| Mailing Address 360 Leland Ave   |                                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| City<br>Palo Alto  | State<br>CA                          | Zip Code<br>94306-1127  | Transaction ID: SA11AI.26073                                     |
| FEC ID number of contributing federal political committee.                               | C                                    | 94300-1127  | Amount of Each Receipt this Period  35.00                        |
| Name of Employer<br>Information Requested  | Occupation                           | n<br>on Requested   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   |                                      | e Year-to-Date ▼<br>225.00  |  |
| Full Name (Last, First, Middle Initial) Nathan Sowder                                    |                                      |   | Date of Receipt  |
| Mailing Address 222 Big Pine Rd  |                                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| City<br>Dayton   | State<br>OH                          | Zip Code<br>45431-1841  | Transaction ID: SA11AI.26076  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.                               | C                                    | 404011041   | 250.00   |
| Name of Employer<br>UPS  | Occupation Supervise                 |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   | <del></del>                          | e Year-to-Date ▼ 300.00   |  |
| Full Name (Last, First, Middle Initial) John C. Sproul                                   |                                      |   | Date of Receipt  |
| Mailing Address 397 Raines Park  |                                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| City<br>Rochester  | State<br>NY                          | Zip Code<br>14613-1118  | Transaction ID: SA11AI.26106                                     |
| FEC ID number of contributing federal political committee.                               | C                                    | 14013-1110  | Amount of Each Receipt this Period  20.00                        |
| Name of Employer<br>Retired  | Occupation Retired                   | n   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼   |                                      | Year-to-Date ▼ 400.00   |  |
| SUBTOTAL of Receipts This Page (optional   | <u> </u>                             |   | 305.00   |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | ·)   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only one)    X   11a                    |
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| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may                                   | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMIT                                   |  |   |  |
| Full Name (Last, First, Middle Initial) John C. Sproul                                    |  |   | Date of Receipt                                |
| Mailing Address 397 Raines Park   |  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
| City  | State  | Zip Code  | Transaction ID: SA11AI.26107                   |
| Rochester  FEC ID number of contributing federal political committee.                     | C  | 14613-1118  | Amount of Each Receipt this Period  60.00      |
| Name of Employer<br>Retired   | Occupation Retired                                 | n   | Contribution                                   |
| Receipt For:  Primary General  Other (specify) ▼  | <del> </del>                                       | e Year-to-Date ▼ 460.00   |  |
| Full Name (Last, First, Middle Initial) Aaron Starr                                       | <b>I</b>   |   | Date of Receipt                                |
| Mailing Address 4048 Tucson St  |  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
| City<br>Simi Valley   | State<br>CA  | Zip Code<br>93063-1144  | Transaction ID: SA11AI.26132                   |
| FEC ID number of contributing federal political committee.                                | C  | 93003-1144  | Amount of Each Receipt this Period 5000.00     |
| Name of Employer<br>Haas Automation, Inc.   | Occupation Controlle                               |   | Contribution                                   |
| Receipt For:  Primary General  Other (specify) ▼  |  | Year-to-Date ▼ 5050.00  |  |
| Full Name (Last, First, Middle Initial)<br>Scott A. Stewart                               |  |   | Date of Receipt                                |
| Mailing Address 8401 E Appomattox   | St   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
| City  | State  | Zip Code  | Transaction ID: SA11AI.26164                   |
| Tucson  FEC ID number of contributing federal political committee.                        | C  | 85710-2922  | Amount of Each Receipt this Period 75.00       |
| Name of Employer<br>Raytheon  | Occupation<br>Engineer                             |   | Contribution                                   |
| Receipt For:  Primary  General  Other (specify) ▼   | <del>_ , ' _                                </del> | Year-to-Date ▼ 375.00   |  |
| SUBTOTAL of Receipts This Page (optional  |  |   | 5135.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page                        | FOR LINE NUMBER: PAGE 96 / 183 (check only one)    X   11a                                |
|--|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | Statements may not be sold or used by any personal he name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Scott A. Stewart   | TLL  | Date of Receipt   |
| Mailing Address 8401 E Appomattox  |  | 05 29 2008  |
| City<br>Tucson   | State Zip Code AZ 85710-2922   | Transaction ID: SA11AI.26165  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.   | C  | 500.00  |
| Name of Employer<br>Raytheon   | Occupation Engineer  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 875.00  |   |
| Full Name (Last, First, Middle Initial) William B. Stutler  Mailing Address 31 Hemlock Rdg   |  | Date of Receipt   |
|  |  | 05 01 2008  |
| City<br>New Milford  | State Zip Code CT 06776-4516   | Transaction ID: SA11AI.26209  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.   | C  | 100.00  |
| Name of Employer<br>Evening Out Inc  | Occupation Dinner/Theatre Owner /P   | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 500.00  |   |
| Full Name (Last, First, Middle Initial) Robert Sullentrup  |  | Date of Receipt   |
| Mailing Address 140 Hunters Rdg  |  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City Saint Charles   | State Zip Code<br>MO 63301-0427  | Transaction ID: SA11AI.26212  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.   | C  | 20.00   |
| Name of Employer<br>Collaboratech  | Occupation Computer Tech.  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 1887.93   |   |
| SURTOTAL of Receipts This Page (optional)  |  | 620.00  |

| SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   | Use separate schedule(s<br>for each category of the<br>Detailed Summary Page                       | FOR LINE NUMBER: PAGE 97 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16                       |
|---|--|---|
| or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  | e name and address of any political committ  | person for the purpose of soliciting contributions ee to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Randy Szabla Mailing Address 32034 W 13 Mile Rd  City Farmington Hills  FEC ID number of contributing federal political committee.  Name of Employer Wayne State University  Receipt For: Primary General Other (specify) | State Zip Code MI 48334-2000  C  Occupation Technician  Aggregate Year-to-Date  250.00             | Date of Receipt    M   M   D   D   2 0 0 8  |
| Full Name (Last, First, Middle Initial)  Mark Szulc  Mailing Address 2312 Far Hills Ave #  City  Dayton  FEC ID number of contributing federal political committee.  Name of Employer Accenture  Receipt For:  Primary General Other (specify)                    | State Zip Code OH 45419-1512  C  Occupation Consultant  Aggregate Year-to-Date  250.00             | Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                      |
| Full Name (Last, First, Middle Initial) Marion L. Taylor  Mailing Address HC 2 Box 247  City Patagonia  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)          | State Zip Code AZ 85624-9707  C  Occupation Information Requested  Aggregate Year-to-Date   350.00 | Date of Receipt    M  |
| SUBTOTAL of Receipts This Page (optional)   | 1  | 320.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                | FOR LINE NUMBER: PAGE 98 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16   |
|---|--|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE   |  |   |
| Full Name (Last, First, Middle Initial) John M. Taylor, MD  Mailing Address 1 Scenic Dr Unit 1110  City Highlands  FEC ID number of contributing federal political committee.  Name of Employer The Samra Group  Receipt For: Primary General Other (specify) | State Zip Code NJ 07732-1321  C  Occupation Physician  Aggregate Year-to-Date   425.00 | Date of Receipt  0 5 0 1 2 0 0 8  Transaction ID: SA11AI.26259  Amount of Each Receipt this Period  85.00  Contribution |
| Full Name (Last, First, Middle Initial) Charles D. Test  Mailing Address 2710 2nd Ave S  City Minneapolis  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)           | State Zip Code MN 55408-1710  C  Occupation Landlord  Aggregate Year-to-Date   500.00  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Full Name (Last, First, Middle Initial) John Thompson  Mailing Address 9308 Russell Ave S  City Minneapolis  FEC ID number of contributing federal political committee.  Name of Employer Agene Systems  Receipt For: Primary General Other (specify)         | State Zip Code MN 55431-2430  C  Occupation Engineer  Aggregate Year-to-Date  250.00   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| SUBTOTAL of Receipts This Page (optional)   |  | 235.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |                        | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 99 / 183 (check only one)    X             |
|---|------------------------|---|--|
| ny information copied from such Reports and for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  > LIBERTARIAN NATIONAL COMMIT |                        | r not be sold or used by any perso<br>dress of any political committee to |  |
| Full Name (Last, First, Middle Initial) Joseph P. Thompson  |                        |   | Date of Receipt  |
| Mailing Address 7474 E Arkansas Av  |                        |   | 05 28 2008   |
| City<br>Denver  | State<br>CO            | Zip Code<br>80231-2546  | Transaction ID: SA11AI.26302  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      |   | 500.00   |
| Name of Employer<br>CDOT  | Occupation<br>Planner  | 1   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  |                        | Year-to-Date ▼ 650.00   |  |
| Full Name (Last, First, Middle Initial) James L. Tobin Mailing Address 1822 Home Ave  | 1                      |   | Date of Receipt  |
|   |                        | 7' 0 1  | 05 27 2008   |
| City<br>Berwyn  | State<br>II            | Zip Code<br>60402-3080  | Transaction ID: SA11AI.26335  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      | 00402 0000  | 125.00   |
| Name of Employer Occupation Elmhurst College Education  |                        |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | Year-to-Date ▼ 425.00   | ]  |
| Full Name (Last, First, Middle Initial) Charles Tolman  |                        |   | Date of Receipt  |
| Mailing Address 7918 Cowan Ave  |                        |   | 05 01 YYYYY<br>2008  |
| City Los Angeles  | State<br>CA            | Zip Code<br>90045-1139  | Transaction ID: SA11AI.26342  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.  | C                      | 33340 1100  | 100.00   |
| Name of Employer<br>Treyarch Corp.  | Occupation<br>Technica |   | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  |                        | Year-to-Date ▼ 500.00   |  |
| SUBTOTAL of Receipts This Page (optional)   | )                      |   | 725.00   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                            | FOR LINE NUMBER:   PAGE   100 / 183   (check only one)     X                             |  |
|--|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | name and address of any political committee to   | n for the purpose of soliciting contributions solicit contributions from such committee. |  |
| Full Name (Last, First, Middle Initial) Patrick Traynor Mailing Address 2040 Estate View Way  City San Jose  FEC ID number of contributing federal political committee.  Name of Employer IXYS Corp.  Receipt For: Primary General Other (specify) | State Zip Code CA 95148-1907  C  Occupation Accountant  Aggregate Year-to-Date  250.00             | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                             |  |
| Full Name (Last, First, Middle Initial) D. A. Tuma Mailing Address 4805 Winter Oak Way  City Antelope  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: Primary General Other (specify)             | State Zip Code CA 95843-5820  C  Occupation Retired  Aggregate Year-to-Date   1200.00              | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                             |  |
| Full Name (Last, First, Middle Initial)  Matthew Ungs  Mailing Address 77 W Huron St  City  Chicago  FEC ID number of contributing federal political committee.  Name of Employer Prudential  Receipt For:  Primary General  Other (specify)       | State Zip Code IL 60610-4052  C  Occupation Healthcare Management  Aggregate Year-to-Date   375.00 | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                             |  |
| SUBTOTAL of Receipts This Page (optional)  |  | 375.00   |  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 101 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  |
|---|---|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT   | e name and address of any political committee to  | on for the purpose of soliciting contributions o solicit contributions from such committee.  |
| Full Name (Last, First, Middle Initial) Greg Utas Mailing Address 2400 State Highway 1  City Euless FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)  | State Zip Code TX 76039-4092  C  Occupation software Consultant  Aggregate Year-to-Date ▼  500.00               | Date of Receipt    M   M   D   D   2008    Transaction ID: SA11AI.26413   Amount of Each Receipt this Period   50.00    Contribution   50.00   |
| Full Name (Last, First, Middle Initial) Greg Utas Mailing Address 2400 State Highway 1  City Euless FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General Other (specify)  | 21 Apt 1907  State Zip Code TX 76039-4092  C  Occupation software Consultant  Aggregate Year-to-Date ▼  1500.00 | Date of Receipt    M M M   |
| Full Name (Last, First, Middle Initial) Arch Wakefield Mailing Address 3047 Point Clear Dr  City Tega Cay  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) | State Zip Code SC 29708-8542  C  Occupation Retired  Aggregate Year-to-Date   375.00                            | Date of Receipt    M   M   D   D   2 0 0 8    Transaction ID: SA11AI.26481   Amount of Each Receipt this Period   75.00    Contribution   Con |
| SUBTOTAL of Receipts This Page (optional)   |   | 1125.00  |

| Mailing Address 354 Summerville Rd  City State Zip Code Transaction ID: SA11AI.26489  Kingsport TN 37663-3007  FEC ID number of contributing federal political committee.  Name of Employer Jay Construction  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page        | FOR LINE NUMBER: PAGE 102 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 17        |
|---|--|--|---|
| Anthony E. Wall  Mailing Address 354 Summerville Rd  City  State Zip Code Kingsport  TN 37683-3007  FEC ID number of contributing federal political committee.  Name of Employer Jay Construction  Full Name (Last, First, Middle Initial) Anthony E. Wall Mailing Address 354 Summerville Rd  City Kingsport  Full Name (Last, First, Middle Initial) Anthony E. Wall Mailing Address 354 Summerville Rd  City Kingsport  TN 37683-3007  Fec ID number of contributing federal political committee.  C  Primary  General Other (specify) ▼  C  C  Cocupation Project Manager  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary Other (specify) ▼  C  Date of Receipt  Aggregate Year-to-Date ▼  Date of Receipt this Period  Contribution  Contribution  Contribution  Date of Receipt  Transaction ID: SA11AL26499  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11AL26490  Amount of Each Receipt this Period  Contribution  Contribution | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)   | e name and address of any political committee to                               | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Anthony E. Wall  Mailing Address 354 Summerville Rd  City State Zip Code Kingsport TN 37663-3007  FEC ID number of contributing federal political committee.  Name of Employer NALSAS/SFCS  Receipt For:  Primary General  Other (specify) ▼  C State Zip Code TN 37663-3007  Transaction ID: SA11AI.26490  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11AI.26490  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11AI.26590  Amount of Each Receipt this Period  Contribution  Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  | Anthony E. Wall  Mailing Address 354 Summerville Rd  City  Kingsport  FEC ID number of contributing federal political committee.  Name of Employer Jay Construction  Receipt For:  Primary General | TN 37663-3007  C  Occupation Project Manager  Aggregate Year-to-Date ▼  215.00 | Transaction ID: SA11AI.26489  Amount of Each Receipt this Period  200.00                  |
| Mary Warner-Nagel  Mailing Address PO Box 2823  City State Zip Code Santa Fe NM 87504-2823  FEC ID number of contributing federal political committee.  Name of Employer NALSAS/SFCS  Receipt For: Primary General Other (specify) ▼  Date of Receipt  Transaction ID: SA11AI.26522  Amount of Each Receipt this Period  Contribution  Contribution   | Anthony E. Wall  Mailing Address 354 Summerville Rd  City  Kingsport  FEC ID number of contributing federal political committee.  Name of Employer Jay Construction  Receipt For:  Primary General | TN 37663-3007  C  Occupation Project Manager  Aggregate Year-to-Date ▼         | Transaction ID: SA11AI.26490  Amount of Each Receipt this Period                          |
| SUBTOTAL of Receipts This Page (optional)   | Mary Warner-Nagel Mailing Address PO Box 2823  City Santa Fe  FEC ID number of contributing federal political committee.  Name of Employer NALSAS/SFCS  Receipt For: Primary General               | NM 87504-2823  C  Occupation Information Requested  Aggregate Year-to-Date ▼   | Transaction ID: SA11AI.26522  Amount of Each Receipt this Period  50.00                   |
|   | SUBTOTAL of Receipts This Page (optional)  | · • • • • • • • • • • • • • • • • • • •  | 265.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page                      | FOR LINE NUMBER: PAGE 103 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16  |
|---|--|---|
| Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITT  | e name and address of any political committee t  | son for the purpose of soliciting contributions o solicit contributions from such committee.  |
| Full Name (Last, First, Middle Initial) Mary Warner-Nagel  Mailing Address PO Box 2823  City Santa Fe  FEC ID number of contributing federal political committee.  Name of Employer NALSAS/SFCS  Receipt For: Primary General Other (specify)             | State Zip Code NM 87504-2823  C  Occupation Information Requested  Aggregate Year-to-Date   450.00 | Date of Receipt    M   M   D   D   2 0 0 8   Transaction ID: SA11AI.26523   Amount of Each Receipt this Period   50.00   Contribution |
| Full Name (Last, First, Middle Initial) Wendell L. Weatherford  Mailing Address 1311 July Dr  City Austin  FEC ID number of contributing federal political committee.  Name of Employer H&R Block  Receipt For:  Primary General Other (specify)          | State Zip Code TX 78753-2923  C  Occupation Income Tax Preparer  Aggregate Year-to-Date  250.00    | Date of Receipt    M   M   D   D   2 3   2 0 0 8  |
| Full Name (Last, First, Middle Initial) John C. Wendell Mailing Address 2834 Ventura Ave  City Santa Rosa  FEC ID number of contributing federal political committee.  Name of Employer Icore International  Receipt For: Primary General Other (specify) | State Zip Code CA 95403-2227  C  Occupation Machinist  Aggregate Year-to-Date   300.00             | Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y  |
| SUBTOTAL of Receipts This Page (optional) .   |  | 400.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   | )                       | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 104 / 183 (check only one)    X                                       |
|--|-------------------------|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT | ne name and add         | y not be sold or used by any pers<br>dress of any political committee to      | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial)  Jeffrey J. Weston  Mailing Address 1255 NW 9th Ave Ap   | ot 301                  |   | Date of Receipt   |
| City<br>Portland   | State<br>OR             | Zip Code<br>97209-2887  | Transaction ID: SA11AI.26587  Amount of Each Receipt this Period                            |
| FEC ID number of contributing federal political committee.   | C                       | 97203-2007  | 100.00  |
| Name of Employer<br>Eleven Wireless<br>Receipt For:  | Occupation SW Deve      |   | Contribution  |
| Primary General Other (specify) ▼  | 7 iggi ogalo            | 500.00  |   |
| Full Name (Last, First, Middle Initial) Jason White Mailing Address 10871 Pittsburg Mine   | e Rd                    |   | Date of Receipt  0 5 0 1 2 0 0 8  |
| City   | State                   | Zip Code  | Transaction ID: SA11AI.26604  |
| Nevada City  | CA                      | 95959-3478  | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | С                       |   | 50.00 Contribution  |
| Name of Employer<br>Information Requested  | Occupation Informati    | n<br>ion Requested  | Contribution  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate               | e Year-to-Date ▼<br>1100.00   |   |
| Full Name (Last, First, Middle Initial)<br>George R. Whitfield   |                         |   | Date of Receipt   |
| Mailing Address 45107 Tarney Wood  |                         |   | 05 / 13 / 2008  |
| City<br>Portsmouth   | State<br>VA             | Zip Code<br>23703-0000  | Transaction ID: SA11AI.26606  Amount of Each Receipt this Period                            |
| FEC ID number of contributing federal political committee.   | C                       |   | 250.00  |
| Name of Employer<br>Halcyon Search Internatio-<br>nal  | Occupation<br>Executive | n<br>e Search Consultant  | Contribution  |
| Receipt For: Primary General Other (specify)   | Aggregate               | e Year-to-Date ▼ 700.00   |   |
|  | -                       |   | 400.00  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS |  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 105 / 183 (check only one)  X 11a 11b 11c 12  13 14 15 16 1 |   |
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| or for                                     | nformation copied from such Reports and S<br>commercial purposes, other than using the<br>AME OF COMMITTEE (In Full) | Statements may<br>e name and add  | y not be sold or used by any persodress of any political committee to             | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| ) LI                                       | IBERTARIAN NATIONAL COMMITTI   | EE  |   |   |
| Ge   | ull Name (Last, First, Middle Initial)<br>eorge R. Whitfield   |   |   | Date of Receipt   |
| _  | ailing Address 45107 Tarney Wood D   |   |   | 05 28 2008  |
| Ci<br><u>P</u>                             | ty<br>ortsmouth  | State<br>VA   | Zip Code<br>23703-0000  | Transaction ID: SA11AI.26607  Amount of Each Receipt this Period                            |
|  | EC ID number of contributing deral political committee.  | C   |   | 2500.00   |
| Na<br>Ha<br>na                             | ame of Employer<br>alcyon Search Internatio-<br>al   | Occupatio<br>Executive  | n<br>e Search Consultant  | Contribution  |
|  | eceipt For: Primary General Other (specify)  |   | e Year-to-Date ▼ 3200.00  |   |
| Ge   | ull Name (Last, First, Middle Initial)<br>eorge R. Whitfield   | l   |   | Date of Receipt   |
| Ma   | ailing Address 45107 Tarney Wood D   | )r  |   | 05 28 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Ci   | •  | State   | Zip Code  | Transaction ID: SA11AI.26608  |
| FE   | ortsmouth  EC ID number of contributing deral political committee.   | C   | 23703-0000  | Amount of Each Receipt this Period  2500.00   |
| Na<br>Ha<br>na                             | ame of Employer<br>alcyon Search Internatio-<br>al   | Occupatio<br>Executive  | n<br>e Search Consultant  | Contribution  |
| Re   | eceipt For: Primary General Other (specify) ▼  | Aggregate   | e Year-to-Date ▼ 5700.00  |   |
|  | ull Name (Last, First, Middle Initial)<br>ake Whitten  |   |   | Date of Receipt   |
| Ma   | ailing Address 402 6th St Apt B5   |   |   | 05 12 2008  |
| Ci   | ty<br>oralville  | State<br>IA   | Zip Code<br>52241-2563  | Transaction ID: SA11AI.26612  Amount of Each Receipt this Period                            |
| FE   | EC ID number of contributing deral political committee.  | C   | 32241-2303  | 180.00  |
| Na<br>Fl                                   | ame of Employer<br>orida State University  | Occupatio<br>Instructo  |   | Contribution  |
| Re   | eceipt For: Primary General Other (specify) ▼  | Aggregate   | e Year-to-Date ▼ 240.00   |   |
| CIID                                       | TOTAL of Receipts This Page (optional)   | 1   |   | 5180.00   |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page                       | FOR LINE NUMBER: PAGE 106 / 183 (check only one)  X 11a 11b 11c 12 13 14 15 16 17        |
|--|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMIT  | Statements may not be sold or used by any person the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Bradley Wiitala Mailing Address PO Box 733  City Big Pine  FEC ID number of contributing federal political committee.  Name of Employer Civil Service  Receipt For: Primary General Other (specify)                      | State Zip Code CA 93513-0733  C  Occupation electronic engineer  Aggregate Year-to-Date ▼  260.00   | Date of Receipt    M   |
| Full Name (Last, First, Middle Initial) Curtis Wolf  Mailing Address 6951 Huntington Wo  City  Jacksonville  FEC ID number of contributing federal political committee.  Name of Employer Vystar Credit Union  Receipt For:  Primary General Other (specify)     | State Zip Code FL 32244-4161  C  Occupation Computer Programmer  Aggregate Year-to-Date  300.00     | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                           |
| Full Name (Last, First, Middle Initial) Terrence Zehrer Lee  Mailing Address 2125 1st Ave Apt 22  City Seattle  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify) | State Zip Code WA 98121-2120  C  Occupation Information Requested  Aggregate Year-to-Date  2000.00  | Date of Receipt    M   |
| SUBTOTAL of Receipts This Page (optional)  | · · · · · · · · · · · · · · · · · · ·   | 2215.00  |
| TOTAL This Period (last page this line numb  | er only)  | 93991.89   |

| SCHEDULE A (FEC Form 3X)  |             |  | FOR LINE NUMBER: PAGE 107 / 183  |
|---|-------------|--|--|
| ITEMIZED RECEIPTS   | -,          | Use separate schedule(s) for each category of the<br>Detailed Summary Page | (check only one)       11a       11b       X       11c       12       13       14       15       16       17 |
| Any information copied from such Reports at or for commercial purposes, other than using            |             |  |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMI  | ITTEE       |  |  |
| Full Name (Last, First, Middle Initial) MIKE JINGOZIAN FOR PRESIDENT Mailing Address 20431 SW CREST |             | 7:- 0-4-   | Date of Receipt    M   M     D   D     Y   Y   Y   Y   Y   Y   Y   |
| City<br>SHERWOOD  | State<br>OR | Zip Code<br>97140  | Transaction ID: SA11C.27140  Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  |             | 0432062  | 910.00  Contribution   |
| Name of Employer  | Occupation  | n  | Contribution   |
| Receipt For:  Primary General  Other (specify) ▼  |             | Year-to-Date ▼ 4030.00   |  |

| SUBTOTAL of Receipts This Page (optional)           | <b>&gt;</b> | 910.00 |
|---|-------------|--------|
| TOTAL This Period (last page this line number only) | <b>•</b>    | 910.00 |

|    | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  |             | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 108 / 183 (check only one)  11a 11b 11c X 12 13 14 15 16 17 |  |  |
|----|--|-------------|---|---|--|--|
|    | Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. |             |   |   |  |  |
|    | NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE  |             |   |   |  |  |
| Α. | Full Name (Last, First, Middle Initial)<br>LIBERTARIAN PARTY OF ILLINOIS   |             |   | Date of Receipt   |  |  |
|    | Mailing Address P.O. Box 1605<br>515 W Main  |             |   | 05 01 7 2008  |  |  |
|    | City   | State       | Zip Code  | Transaction ID: SA12.27142  |  |  |
|    | Chicago  | <u>IL</u>   | 60690   | Amount of Each Receipt this Period  |  |  |
|    | FEC ID number of contributing federal political committee.   | <b>C</b> C0 | 0315713   | 3400.00   |  |  |
|    | Name of Employer   | Occupatio   | n   | Transfer from Party Committee   |  |  |
|    | Receipt For:  Primary  General  Other (specify)  | Aggregate   | e Year-to-Date ▼ 3400.00  |   |  |  |
| В. | Full Name (Last, First, Middle Initial) LIBERTARIAN PARTY OF ILLINOIS  |             |   | Date of Receipt   |  |  |
|    | Mailing Address P.O. Box 1605<br>515 W Main  |             |   | 05 01 YYYYY<br>2008   |  |  |
|    | City   | State       | Zip Code  | Transaction ID: SA12.27144  |  |  |
|    | Chicago  | IL          | 60690   | Amount of Each Receipt this Period  |  |  |
|    | FEC ID number of contributing federal political committee.   | <b>C</b> C0 | 0315713   | 3500.00   |  |  |
|    | Name of Employer   | Occupatio   | n   | Transfer from Party Committee   |  |  |
|    | Receipt For:  Primary  General  Other (specify)  |             | e Year-to-Date ▼<br>6900.00   |   |  |  |

| SUBTOTAL of Receipts This Page (optional)           | •        | 6900.00 |
|---|----------|---------|
| TOTAL This Period (last page this line number only) | <b>•</b> | 6900.00 |

| SCHEDULE A (FEC Form 3X)  |                                |   | FOR LINE NUMBER: PAGE 109 / 183   |  |  |  |  |  |  |  |  |  |
|---|--------------------------------|---|---|--|--|--|--|--|--|--|--|--|
| ITEMIZED RECEIPTS   |                                | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only one)  11a 11b 11c 12  13 14 X 15 16 17  |  |  |  |  |  |  |  |  |  |
| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may<br>name and add | y not be sold or used by any persodress of any political committee to         | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTI                                       | EE                             |   |   |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Elizabeth Brooks Mailing Address 870 Ribaut Rd City     | State                          | Zip Code  | Date of Receipt    M  |  |  |  |  |  |  |  |  |  |
| Beaufort  FEC ID number of contributing federal political committee.                            | SC                             | 29902-5428  | Amount of Each Receipt this Period 510.00   |  |  |  |  |  |  |  |  |  |
| Name of Employer Information Requested  Receipt For:  |                                | on Requested  | COBRA Payment from Former Employee  |  |  |  |  |  |  |  |  |  |
| Primary General Other (specify) ▼   | Aggregate                      | e Year-to-Date ▼<br>705.00  |   |  |  |  |  |  |  |  |  |  |

| SUBTOTAL of Receipts This Page (optional)           | <b>&gt;</b> | 510.00 |
|---|-------------|--------|
| TOTAL This Period (last page this line number only) | <b>•</b>    | 510.00 |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE                 |  | PAGE 110 / 183        |
|---|--|--------------------------|--|-----------------------|
| ITEMIZED DISBURSEMENTS  | for each category of the                               | (check only              | rone)<br>☐ 22   ☐ 23   ☐               | 24 25 26              |
|   | Detailed Summary Page                                  | 27                       | 28a 28b                                | 28c 29 30b            |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |  |                       |
| NAME OF COMMITTEE (In Full)   |  |                          |  |                       |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                          |  |                       |
| Full Name (Last, First, Middle Initial) Advanced Mailing Services, LLC                                    |  |                          | Transaction ID: S Date of Disbursement |                       |
| Mailing Address 14970 Farm Creek Drive  |  |                          | 05 15                                  | Y 2008                |
|   | State Zip Code<br>VA 22191-3550                        |                          | Amount of Each Disl                    | bursement this Period |
| Purpose of Disbursement Non Candidate Party Printing/Mailing  |  | 003                      |  | 1496.95               |
| Candidate Name  |  | 003<br>Category/<br>Type |  |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | 71-1                     |  |                       |
| State: District:  |  |                          |  |                       |
| Full Name (Last, First, Middle Initial) Advanced Mailing Services, LLC                                    |  |                          | Transaction ID: S Date of Disbursemen  | nt                    |
| Mailing Address 14970 Farm Creek Drive  |  |                          | 05 31                                  | 2008                  |
| ,   | State         Zip Code           VA         22191-3550 |                          | Amount of Each Disl                    | bursement this Period |
| Purpose of Disbursement Non Candidate Party Printing and Mailing  |  | 003                      |  | 1393.02               |
| Candidate Name  |  | Category/<br>Type        |  |                       |
| Senate President  | ment For: Primary General Other (specify)              |                          |  |                       |
| State: District:  |  |                          |  |                       |
| Full Name (Last, First, Middle Initial) American Express Card -42007                                      |  |                          | Transaction ID: S Date of Disbursemen  | nt                    |
| Mailing Address PO Box 1270   |  |                          | 05 09                                  | 2008                  |
| •   | State Zip Code<br>NJ 07101-1270                        |                          | Amount of Each Disl                    | bursement this Period |
| Purpose of Disbursement Credit Card Payment(See Attached Memos)   |  | 001                      |  | 9596.63               |
| Candidate Name  |  | Category/<br>Type        |  |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | . ,,,,                   |  |                       |
| State: District:  |  |                          |  |                       |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                          |  | 12486.60              |

| SCHEDULE B (FEC Form 3X)  |                                | rate schedule(s)                |            | OR LINI   |          |            | R:                |        | PA        | GE 111    | / 183          |
|---|--------------------------------|---------------------------------|------------|-----------|----------|------------|-------------------|--------|-----------|-----------|----------------|
| TEMIZED DISBURSEMENTS   | Detailed S                     | category of the<br>Summary Page | X          | 21b<br>27 | Ė        | 22<br>28a  | 23<br>28b         | В      | 24<br>28c | 25<br>29  |                |
| Any Information copied from such Reports and Stater<br>or for commercial purposes, other than using the nam |                                |                                 |            |           |          |            |                   |        |           |           |                |
| NAME OF COMMITTEE (In Full)   | TIE ATIO AGGIES                | ss or arry political            | COMMIN     | ilee io s | Olicit   | COITLIIL   | Julions II        | OIII S | such c    | ommittee  |                |
| LIBERTARIAN NATIONAL COMMITTEE  |                                |                                 |            |           |          |            |                   |        |           |           |                |
| Full Name (Last, First, Middle Initial) 47th Street Camera  |                                |                                 |            |           |          | Date of    | Disburs           | eme    |           | 3.26871.  |                |
| Mailing Address 395 Kings Hwy   |                                |                                 |            |           |          | 0 5        | ) / D             | 9      | / Y       | ž 0 ŏ     | 8 <sup>Y</sup> |
| City<br>Brooklyn  | State<br>NY                    | Zip Code<br>11223-1615          |            |           | ,        | Amoun      | t of Each         | n Dis  | burser    | nent this | Period         |
| Purpose of Disbursement   |                                |                                 | -          | -         |          |            |                   |        |           | 114.9     | 0              |
| Video Supplies  |                                |                                 | OC.        |           |          |            |                   |        |           |           |                |
| Candidate Name  |                                |                                 | Cate<br>Ty |           |          | ЛЕМО       | O ITEM]           | 1      |           |           |                |
| Office Sought: House Disburs Senate President State: District:  | ement For: Primary Other (spec | General<br>cify) ▼              |            |           |          |            | - · · · · · · · · | •      |           |           |                |
| Full Name (Last, First, Middle Initial)   |                                |                                 |            |           | ٠,       | ranca      | oction ID         | . 0    | R21R      | 3.26871.  | 1              |
| 600 Restaurant  |                                |                                 |            |           |          | Date of    | Disburs           | eme    |           |           |                |
| Mailing Address 600 New Hampshire Av  | e, NW                          |                                 |            |           |          | 0 5        |                   | 9 9    | L         | žoŏ       | 8              |
| City<br>Washington  | State<br>DC                    | Zip Code<br>20037-2403          |            |           | 1        | 4moun      | it of Each        | n Dis  | burser    | ment this | Period         |
| Purpose of Disbursement   | DC                             | 20037-2403                      |            |           | +        |            |                   |        |           | 46.8      | 30             |
| Employee Travel Expenses-Meals  |                                |                                 | 00         | )2        |          |            |                   |        |           |           |                |
| Candidate Name  |                                |                                 | Cate<br>Ty | gory/     |          | AEM.       | O ITEM]           | 1      |           |           |                |
| Office Sought: House Disburs Senate President State: District:  | ement For: Primary Other (spec | General cify) ▼                 |            |           | יו       | VI EIVI C  | J I I E IVI       | J      |           |           |                |
| Full Name (Last, First, Middle Initial)   |                                |                                 |            |           | ١,       | ranca      | otion ID          | . 0    | D01D      | 3.26871.  | 2              |
| Accurint  |                                |                                 |            |           |          | Date of    | Disburs           | eme    |           |           |                |
| Mailing Address P.O. Box 538358   |                                |                                 |            |           |          | 0 5        |                   | 9 9    |           | ž 0 ŏ     | 8              |
| City<br>Atlanta   | State<br>GA                    | Zip Code<br>30353-8358          |            |           | 1        | Amoun      | t of Each         | n Dis  | burser    | ment this | Period         |
| Purpose of Disbursement   | UA .                           | 00000-0000                      |            |           | $+ \mid$ |            |                   |        |           | 279.4     | 4              |
| Donor Address History Search  |                                |                                 | 00         | )1        |          |            |                   |        |           | -         |                |
| Candidate Name  |                                |                                 | Cate<br>Ty | gory/     | r        | /EB4/      | O ITEM]           | 1      |           |           |                |
| Office Sought: House Disburs Senate President State: District:  | ement For: Primary Other (spec | General cify) ▼                 |            |           | ן ני     | VI E IVI C | J I I E IVI ]     | I      |           |           |                |
| SUBTOTAL of Disbursements This Page (optional)  |                                |                                 |            | <u> </u>  |          |            |                   |        |           | 0.0       | 0              |
| TOTAL This Period (last page this line number only  | ·)                             |                                 |            |           |          |            |                   |        |           |           |                |
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| 290// 2000 1001011   |   |                          |  |
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| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only     | NUMBER: PAGE 112 / 183 y one) 22 23 24 25 26   |
|  | , ,   | 27                       | 28a 28b 28c 29 30b   |
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| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE   |   |                          |  |
| Full Name (Last, First, Middle Initial)<br>Adorama Electronics   |   |                          | Transaction ID: SB21B.26871.3 Date of Disbursement   |
| Mailing Address 42 W 18th St   |   |                          | 05 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0   |
| City<br>New York   | State Zip Code<br>NY 10011-0000   |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement  |   |                          | 544.00   |
| Video Equipment for Outreach Candidate Name  |   | 001<br>Category/<br>Type |  |
| Office Sought: House Disburse Senate President State: District:  | ment For: Primary General Other (specify)                               | .,,,,,                   | [MEMO ITEM]  |
| Full Name (Last, First, Middle Initial)  |   |                          | Transaction ID: SB21B.26871.4  |
| Altertra Inc.  |   |                          | Date of Disbursement   |
| Mailing Address 116 W. 77th Ave #311   |   |                          | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ O & O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix}$ |
| ,  | State Zip Code  |                          | Amount of Each Disbursement this Period  |
| Stillwater Purpose of Disbursement   | OK 74074-4001   |                          | 8.95   |
| Internet Server Monitoring   |   | 001                      |  |
| Candidate Name   |   | Category/<br>Type        | [MEMO ITEM]  |
| Office Sought: House Disburse Senate President State: District:  | ment For: Primary General Other (specify)                               |                          |  |
| Full Name (Last, First, Middle Initial)  |   |                          | Transaction ID: SB21B.26871.5  |
| American Express Card -42007   |   |                          | Date of Disbursement   |
| Mailing Address PO Box 1270  |   |                          | 05 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0   |
|  | State Zip Code NJ 07101-1270  |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement  |   | 1                        | 132.45   |
| Credit Card Finance Charge Candidate Name  |   | 001<br>Category/         |  |
|  |   | Type                     | [MEMO ITEM]  |
| Office Sought: House Disburse Senate President   | ment For: Primary General Other (specify)                               |                          | [MEMOTIEM]   |
| State: District:   | Salor (opoony)  |                          |  |
| SUBTOTAL of Disbursements This Page (optional)   |   | <u>Þ</u>                 | 0.00   |

TOTAL This Period (last page this line number only) .....

|              | CHEDULE B (FEC Form 3)   | ' Use s                               | eparate schedule(s)                |    |               |           |   | BEI    | R:  |              |      | Р     | AGE  | 113     | / 18 | 3  |
|--------------|--|---------------------------------------|------------------------------------|----|---------------|-----------|---|--------|---|--------------|------|-------|------|---------|------|----|
| П            | EMIZED DISBURSEMENTS   |                                       | ch category of the ed Summary Page |    | X             | 21b<br>27 | 22  | ı      | 23 24 25 29 29 29 28c 29 29 29 28c 29 29 29 28c 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20 | F            | ] 2  |       |      |         |      |    |
|              | y Information copied from such Reports and for commercial purposes, other than using |                                       |                                    |    |               |           | Transaction ID: SB21B.26871.7  Date of Disbursement this Per 131.32  Transaction ID: SB21B.26871.7  Amount of Each Disbursement this Per 131.32  Transaction ID: SB21B.26871.7  Date of Disbursement this Per 2 0 0 8 4 5 6 7 6 7 6 7 7 7 7 7 8 7 7 8 7 8 7 8 7 8 |        |   |              |      |       |      |         |      |    |
| $\backslash$ | NAME OF COMMITTEE (In Full)<br>LIBERTARIAN NATIONAL COMMI                            | ΓΤΕΕ                                  |                                    |    |               |           |   |        |   |              |      |       |      |         |      |    |
|              | Full Name (Last, First, Middle Initial) AT&T - Mobility                              |                                       |                                    |    |               |           | Da  | te o   | f Di  | sburs        | em   | ent   |      |         |      |    |
|              | Mailing Address PO Box 6463  |                                       |                                    |    |               |           | 05 09 2008  |        |   |              |      |       |      |         |      |    |
|              | City<br>Carol Stream   | State<br>IL                           | Zip Code<br>60197-6463             |    |               |           | An  | nour   | nt of   | Each         | n D  | sburs | -    | -       |      | od |
|              | Purpose of Disbursement Cell Phone Service   |                                       |                                    |    |               |           | 131.3   | 32     | _   |              |      |       |      |         |      |    |
|              | Candidate Name   |                                       |                                    | Ca | atego<br>Type | ory/      |   |        |   |              | _    |       |      |         |      |    |
|              | Senate<br>President  | Disbursement Fo<br>Primary<br>Other ( |                                    |    |               |           | - [MI   | EΜ     | O 1 <sup>-</sup>  | TEM <u>:</u> | ]    |       |      |         |      |    |
| _            | State: District: Full Name (Last, First, Middle Initial)                             |                                       |                                    |    |               |           | T   |        |   | ID           |      | CDO1  | D 00 | 2071    | 7    |    |
|              | Central Parking System   |                                       |                                    |    |               |           | Da  | te o   | f Di  | sburs        | em   | ent   |      |         |      |    |
|              | Mailing Address PO Box 790402<br>Attn: Monthly Acci                                  | s Dept.                               |                                    |    |               |           | Ö   | 5      |   |              | ว 9ั | J L   | 2    | 0 0     | 8    |    |
|              | City<br>St. Louis  | State<br>MO                           | Zip Code<br>63179-0402             |    |               |           | An  | nour   | nt of   | Each         | n D  | sburs | emer | nt this | Peri | od |
|              | Purpose of Disbursement Parking Space Rental   |                                       |                                    | Г  | 001           |           |   |        |   |              |      |       | 2    | 225.0   | 0    | _  |
|              | Candidate Name   |                                       |                                    | Ca | atego<br>Type | ory/      |   |        | <b>~</b> !-   |              | -    |       |      |         |      |    |
|              | Senate President   | Disbursement Fo<br>Primary<br>Other ( |                                    |    |               |           | - LINII   | =IVI ( | Οī  | I EMI        | J    |       |      |         |      |    |
|              | State: District: Full Name (Last, First, Middle Initial)                             |                                       |                                    |    |               |           | Tra   | เทรส   | actio   | on ID        | ):   | SB21  | B.26 | 6871.   | 8    |    |
|              | Corporate & Leisure  |                                       |                                    |    |               |           | Da  | te o   | f Di  | sburs        | em   | ent   |      |         |      |    |
|              | Mailing Address 2700 W. Cyprus (<br>Suite D-105                                      | Creek Road                            |                                    |    |               |           | O   | 5      |   | ູ້           | ว 9ั | ]     | 2    | 00      | 8    |    |
|              | City<br>Ft Lauderdale  | State<br>FL                           | Zip Code<br>33309-0000             |    |               |           | An  | nour   | nt of   | Each         | n D  | sburs | emer | nt this | Peri | od |
|              | Purpose of Disbursement<br>Employee Travel Expense-Air                               |                                       |                                    | Г  | 002           |           |   |        | -   |              |      |       |      | 60.0    | 0    | _  |
|              | Candidate Name   |                                       |                                    |    | atego<br>Type | ory/      |   |        |   |              |      |       |      |         |      |    |
|              | Office Sought: House I Senate President  | Disbursement Fo                       |                                    |    | . 76.         | -         | - [ME   | EM     | 0 1   | ГЕМ          | ]    |       |      |         |      |    |
| _            | State: District:   |                                       | . •/ •                             |    |               |           |   |        |   |              |      |       |      |         |      |    |
| ١,           | SUBTOTAL of Disbursements This Page (o   | ntional)                              |                                    |    |               |           |   |        |   |              |      | •     |      | 0.0     | 0    |    |

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| CCHEDIII E B (EEC Form 2V)                            |  | <u> </u>          |   |
|---|--|-------------------|---|
| SCHEDULE B (FEC Form 3X)                              | Use separate schedule(s)                       | FOR LINE I        |   |
| ITEMIZED DISBURSEMENTS                                | for each category of the Detailed Summary Page | X 21b             | 22 23 24 25 26  |
| Any Information copied from such Reports and Statem   | ents may not be sold or used h                 | 27 27             | 28a 28b 28c 29 30b  |
| or for commercial purposes, other than using the name |  |                   |   |
| NAME OF COMMITTEE (In Full)                           |  |                   |   |
| LIBERTARIAN NATIONAL COMMITTEE                        |  |                   |   |
| Full Name (Last, First, Middle Initial)               |  |                   | Transaction ID: SB21B.26871.9   |
| DomainTools.com                                       |  |                   | Date of Disbursement  |
| Mailing Address 12806 SE 22nd Plc                     |  |                   | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & O & D \\ O & O & S \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix} \end{bmatrix}$  |
|   | State Zip Code<br>WA 98005-3931                |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement                               | 000000001                                      |                   | 30.00   |
| Software Candidate Name                               |  | 001               |   |
| Candidate Name  |  | Category/<br>Type |   |
|   | ment For:                                      |                   | [MEMO ITEM]   |
| Senate   President                                    | Primary General Other (specify) ▼              |                   |   |
| State: District:                                      | Care (cpcca), V                                |                   |   |
| Full Name (Last, First, Middle Initial)               |  |                   | Transaction ID: SB21B.26871.10  |
| Google Ad Works                                       |  |                   | Date of Disbursement  |
| Mailing Address 1600 Amphitheatre Prky                |  |                   | $\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} S \\ M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{smallmatrix} O \\ O \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ V \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ V \\ O \end{smallmatrix} \end{smallmatrix}$ |
| ,   | State Zip Code<br>CA 94043-1351                |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement                               | 0.10 10 10 10                                  |                   | 42.66   |
| LP Branding Marketing Expense  Candidate Name         |  | 003               |   |
| Calididate Name                                       |  | Category/<br>Type | IMENO ITEM  |
|   | ment For:                                      |                   | [MEMO ITEM]   |
| Senate President                                      | Primary General Other (specify) ▼              |                   |   |
| State: District:                                      |  |                   |   |
| Full Name (Last, First, Middle Initial) Greyhound     |  |                   | <b>Transaction ID:</b> SB21B.26871.11 Date of Disbursement  |
|   |  |                   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Mailing Address 350 N. St. Paul St.                   |  |                   | 05 09 2008  |
|   | State Zip Code<br>TX 75201-4240                |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement                               | 10201 1210                                     | • •               | 31.00   |
| Employee Travel Expense-Bus Candidate Name            |  | 002<br>Category/  |   |
| Odificial Name  |  | Type              | IMENO ITEMI   |
| , H   | ment For:                                      |                   | [MEMO ITEM]   |
| Senate President                                      | Primary General Other (specify) ▼              |                   |   |
| State: District:                                      | · · · · · · · · · · · · · · · · · · ·          |                   |   |
| SUBTOTAL of Disbursements This Page (optional) .      |  |                   | 0.00  |

|          | CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS  | Use separate so for each categor Detailed Summa | ry of the (     | FOR LINE (check only X 21b 27 | NUMBER: PAGE 115 / 183 / one)  22  |
|----------|---|---|-----------------|-------------------------------|--|
|          | ny Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE |   |                 | any person f                  | or the purpose of soliciting contributions   |
| <u> </u> | Full Name (Last, First, Middle Initial) J & K Cameras,Inc.  Mailing Address 1965 McDonald Ave   |   |                 |                               | Transaction ID: SB21B.26871.12 Date of Disbursement  M 5 M / D 0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|          | City Brooklyn Purpose of Disbursement   | State Zip C<br>NY 112                           | Code<br>23-1805 |                               | Amount of Each Disbursement this Period 4724.99  |
|          | Video Equipment for Outreach  Candidate Name  |   | C               | 001<br>Category/<br>Type      |  |
|          | Office Sought:  House Senate President State:  Disburs  | ement For: Primary Other (specify)              | General         |                               | [MEMO ITEM]  |
| -<br>3.  | Full Name (Last, First, Middle Initial) Postmaster  |   |                 |                               | Transaction ID: SB21B.26871.13 Date of Disbursement  |
|          | Mailing Address US Post Office Waterga<br>2500 virginia Ave NW  | ite   |                 |                               | $\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} 0 & 0 & 0 \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 0 & 0 & 8 \\ 2 & 0 & 0 & 8 \end{bmatrix}$ |
|          | City<br>Washington  | State Zip C<br>DC 200                           | ode<br>37-0000  |                               | Amount of Each Disbursement this Period  |
|          | Purpose of Disbursement Postage Candidate Name  |   | C               | 001<br>Category/<br>Type      | 103.85   |
|          | Office Sought:  House Senate President State:  Disburs  | ement For: Primary Other (specify)              | General         |                               | [MEMO ITEM]  |
|          | Full Name (Last, First, Middle Initial) Rackspace US Inc.   |   |                 |                               | Transaction ID: SB21B.26871.14 Date of Disbursement  |
|          | Mailing Address 9725 Datapoint Dr. #10  | 0   |                 |                               | 05 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0   |
|          | City<br>San Antonio   | State Zip C                                     | Code<br>29-0000 |                               | Amount of Each Disbursement this Period  |
|          | Purpose of Disbursement Web Server Hosting Services Candidate Name  |   | C               | 001<br>Category/              | 649.00   |
|          | Office Sought: House Senate President State: District:  | ement For: Primary Other (specify)              | General         | Type                          | [MEMO ITEM]  |
| Γ,       | SUBTOTAL of Disbursements This Page (optional)  |   |                 |                               | 0.00   |

|           | CHEDULE B (FEC Form 3X)  | Use separate schedule(s)                          |      |      | R LINE    |                  | R:    | 22 23 24 25 : |      |        |        |          |                |
|-----------|--|---|------|------|-----------|------------------|-------|---------------|------|--------|--------|----------|----------------|
|           | EMIZED DISBURSEMENTS   | for each category of the<br>Detailed Summary Page |      | X    | 21b<br>27 | 22<br>28a        |       | 28b           |      | 28     | С      | 29       | 2 3            |
|           | y Information copied from such Reports and Statem for commercial purposes, other than using the name |   |      |      |           |                  |       |               |      |        |        |          |                |
|           | NAME OF COMMITTEE (In Full)  | and address of any pointed                        | COII |      | 00 10 30  | mon com          | iibui | 10113 1       | 1101 | 11 300 | 1 0011 | milloc   |                |
| $\rangle$ | LIBERTARIAN NATIONAL COMMITTEE   |   |      |      |           |                  |       |               |      |        |        |          |                |
|           | Full Name (Last, First, Middle Initial)<br>Sleep Inn Urbana  |   |      |      |           | Trans<br>Date    |       |               |      |        | 1B.2   | 26871.   | 15             |
|           | Mailing Address 1908 N. Lincoln Ave  |   |      |      |           | 0 <sup>M</sup> 5 | М     | / D           | 0    | 9 /    | Υ      | ž 0 ŏ    | 8 <sup>Y</sup> |
|           | ,  | State Zip Code<br>IL 61801-1025                   |      |      |           | Amo              | unt c | f Eac         | h [  | Disbur |        | ent this |                |
|           | Purpose of Disbursement Employee Travel Expense-Hotel  |   |      | 001  |           |                  |       |               |      |        |        | 453.8    | 6              |
|           | Candidate Name   |   |      | ateg | ory/      |                  |       |               |      |        |        |          |                |
|           | Senate President   | ment For: Primary General Other (specify) ▼       |      |      |           | [MEN             | 10 1  | TEN           | 1]   |        |        |          |                |
|           | State: District:   |   |      |      |           |                  |       |               |      |        |        |          |                |
|           | Full Name (Last, First, Middle Initial) ThePlanet.com  |   |      |      |           | Trans<br>Date    | of D  | isbur         | ser  | nent   |        | 26871.   |                |
|           | Mailing Address 1333 N. Stemmons Fwy   | #110  |      |      |           | 0 5              | М     | / D           | 0    | 9 /    | Y      | ž 0 ŏ    | 8 <sup>Y</sup> |
|           | ,  | State Zip Code<br>TX 75207-3724                   |      |      |           | Amo              | unt c | f Eac         | h [  | Disbur | seme   | ent this | Period         |
|           | Purpose of Disbursement Web Hosting Server   |   | Γ    | 001  | 1         | L.               |       | -             |      |        |        | 574.0    | 0              |
|           | Candidate Name   |   |      | ateg |           |                  |       |               |      |        |        |          |                |
|           | Office Sought:    House   Disburse     Senate   President     State: District:                       | ment For: Primary General Other (specify)         |      |      |           | [MEN             | 10    | TEN           | 1]   |        |        |          |                |
|           | Full Name (Last, First, Middle Initial) USAirways  |   |      |      |           | Tran:<br>Date    |       |               |      |        | 1B.2   | 26871.   | 18             |
|           | Mailing Address 2345 Crystal Dr  |   |      |      |           | 0 <sup>M</sup> 5 | М     | / D           | 0    | 9 /    | Υ      | ž 0 Ŏ    | 8 <sup>Y</sup> |
|           |  | State Zip Code<br>VA 22227-0000                   |      |      |           | Amo              | unt c | f Eac         | h [  | Disbur | seme   | ent this |                |
|           | Purpose of Disbursement Employee Travel Expense-Air  |   |      | 002  |           | L.               | 0     |               |      |        |        | 392.5    | 0              |
|           | Candidate Name   |   |      | ateg | ory/      |                  |       |               |      |        |        |          |                |
|           | Office Sought:    House   Disburse     Senate   President     State: District:                       | ment For: Primary General Other (specify)         |      |      |           | [MEN             | 10    | TEN           | 1]   |        |        |          |                |
|           | otate. District.   |   |      |      |           |                  | _     |               | _    |        |        |          | 0              |

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| 0011501115075  |  |                    |   |
|--|--|--------------------|---|
| SCHEDULE B (FEC Form 3X)   | Use separate schedule(s)                       |                    | NUMBER: PAGE 117/183  |
| ITEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page | (check only 21b 27 | 7 Olife)  22  |
| Any Information copied from such Reports and Statemor for commercial purposes, other than using the name |  |                    |   |
| NAME OF COMMITTEE (In Full)  | and address of any political                   | Committee to so    | ilicit contributions from such committee  |
| LIBERTARIAN NATIONAL COMMITTEE   |  |                    |   |
| Full Name (Last, First, Middle Initial)  |  |                    | Transaction ID: SB21B.26898   |
| American Express Merch Services  |  |                    | Date of Disbursement  |
| Mailing Address P.O. Box 1270  |  |                    | $\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 3 & 1 \\ 0 & 3 & 1 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 1 \\ 0 & 2 & 0 & 0 \\ 0 & 3 & 1 \end{bmatrix}$ |
| ,  | State Zip Code<br>NJ 07101-1270                |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement  | 071011270                                      |                    | 31.34   |
| Credit Card Processing Fee   |  | 001                |   |
| Candidate Name   |  | Category/<br>Type  |   |
| Senate President   | ment For: Primary General Other (specify)      | 71                 |   |
| State: District:   |  |                    |   |
| Full Name (Last, First, Middle Initial)  American National Insurance Co.                                 |  |                    | Transaction ID: SB21B.26899   |
| American National Insurance Co.  |  |                    | Date of Disbursement  |
| Mailing Address Attn: Lea Pollack P. O. Box 1830 - Pension   | •  |                    | 05  7  7  7  7  7  7  7  7  7  7  7  7  7   |
| ,  | State Zip Code TX 77550-1830                   |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement  | 77000 1000                                     |                    | 328.09  |
| LP 401k Contributions and Fees Candidate Name  |  | 001                |   |
| Candidate Name   |  | Category/<br>Type  |   |
|  | ment For:                                      |                    |   |
| Senate President   | Primary General Other (specify) ▼              |                    |   |
| State: District:   | , (1 3) <b>V</b>                               |                    |   |
| Full Name (Last, First, Middle Initial) AMGRO, Inc.  |  |                    | Transaction ID: SB21B.26901 Date of Disbursement  |
| Mailing Address 100 N. Parkway PO Box 15089  |  |                    | $\begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} / \begin{bmatrix} 0.1 & 0.5 \\ 1.5 & 0.5 \end{bmatrix} / \begin{bmatrix} 0.1 & 0.5 \\ 0.2 & 0.5 \end{bmatrix} $                     |
| City   | State Zip Code<br>MA 01615-0089                |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement  | WIA 01015-0009                                 |                    | 821.02  |
| D and O Insurance  |  | 001                |   |
| Candidate Name   |  | Category/<br>Type  |   |
| Office Sought: House Disburse Senate President   | ment For: Primary General Other (specify)      | Турс               |   |
| State: District:   |  |                    |   |
| SUBTOTAL of Disbursements This Page (optional)   |  | <b>&gt;</b>        | 1180.45   |

| Any Information of Full Main Main City Ball Care Care Care Care Care Care Care Care | formation copied commercial purpout ME OF COMMIT BERTARIAN North III Name (Last, Firsthem Blue Crowling Address youltimore roose of Disburse apployee Medical In Indidate Name fice Sought:  | ATIONAL COMI<br>st, Middle Initial)<br>oss Blue Shield<br>PO Box 791273   | and Statemering the name a | for each of Detailed S             |                        | l by a | X<br>any p   |   | 22<br>28a<br>or the puicit cont | saction of Diagram | ons fron ID: |                | contr<br>h com | 6902<br>2 0 0 8 | Y      |
|---|--|---|----------------------------|------------------------------------|------------------------|--------|--------------|---|---------------------------------|--------------------|--------------|----------------|----------------|-----------------|--------|
| or for control NAI LIE Full And City Bala Pur Em                                    | EXAMPLE OF COMMITS AND ADDRESS OF COMMITS AND | reses, other than using the ses, other than | MITTEE                     | and addres                         | zip Code               |        |              |   | Trans Date 0 5                  | saction of Diagram | ons fron ID: | SB2            | 1B.2           | 6902<br>2 0 0 8 | Y      |
| Full An  City Ba  Pur Em  Car   | ME OF COMMIT<br>BERTARIAN N<br>II Name (Last, Fir<br>them Blue Cro<br>tilling Address<br>y<br>altimore<br>rpose of Disburse<br>apployee Medical In<br>andidate Name  | TTEE (In Full) ATIONAL COMI st, Middle Initial) ass Blue Shield PO Box 791273 ement nsurance House  | MITTEE  3  St              | ate                                | Zip Code               |        |              |   | Trans Date                      | saction of Dis     | on ID:       | : SB2<br>ement | 21B.2          | 6902<br>Ž 0 Ŏ 8 |        |
| And Maid City Baid Pur Em Car   | athem Blue Cro<br>diling Address<br>y<br>altimore<br>rpose of Disburse<br>aployee Medical In<br>andidate Name  | PO Box 791273  ement  nsurance  House   | St<br>M                    |                                    |                        |        |              |   | Date 0 <sup>M</sup> 5           | of Di              | sburs        | ement<br>5     | Y 2            | ž 0 ŏ 8         |        |
| City<br>Ba<br>Pur<br>Em<br>Car  | y<br>altimore<br>rpose of Disburse<br>aployee Medical In<br>andidate Name  | ement<br>nsurance<br>House  | St<br>M                    |                                    |                        |        |              |   |                                 |                    |              |                |                |                 |        |
| Bal<br>Pur<br>Em<br>Car   | Attimore rpose of Disburse nployee Medical In ndidate Name fice Sought:  | House   | M                          |                                    |                        |        |              |   | Amou                            | ınt of             | Each         | Disbu          | seme           | nt this F       |        |
| Em<br>Car   | nployee Medical Inndidate Name   | House   | Lac                        |                                    |                        |        |              |   |                                 | -                  |              |                |                |                 | 'eriod |
|   | fice Sought:   |   | Loui                       |                                    |                        |        | 001          |   | L.                              | _                  |              |                |                | 809.75          | ;      |
| Off   |  |   |                            |                                    |                        |        | tego<br>Type | - |                                 |                    |              |                |                |                 |        |
|   |  | President   |                            | ent For:<br>Primary<br>Other (spec | General                |        |              |   |                                 |                    |              |                |                |                 |        |
| Sta<br>Full   | ate: L<br>Il Name (Last, Fir   | District:<br>st, Middle Initial)  |                            |                                    |                        |        |              |   | Trans                           | sactio             | on ID        | : SB2          | 1B 2           | 6903            |        |
| Arc   | cade Press   |   |                            |                                    |                        |        |              |   | Date                            | of Di              | sburs        | ement          |                |                 |        |
| Mai   | illing Address   | 5436 Harford R  | ld.                        |                                    |                        |        |              |   | o <sup>M</sup> 5                | M                  | <b>1</b>     | 5              | Y              | 2008            | Y      |
| City<br>Ba  | y<br>Iltimore  |   |                            | ate<br>ID                          | Zip Code<br>21214-2292 |        |              |   | Amou                            | ınt of             | Each         | Disbu          | seme           | nt this F       | 'eriod |
|   | rpose of Disburse<br>n Candidate Part  | ement<br>y Printing and Maili   | ng                         |                                    |                        |        | 001          |   | L.                              |                    |              |                |                | 981.75          | 5      |
| Car   | ndidate Name   |   |                            |                                    |                        |        | tego<br>Type |   |                                 |                    |              |                |                |                 |        |
| Offi  | fice Sought:   | House<br>Senate<br>President  | I —                        | ent For:<br>Primary<br>Other (spec | General cify) ▼        |        |              |   |                                 |                    |              |                |                |                 |        |
| Sta   |  | District:   |                            |                                    |                        |        |              |   |                                 |                    |              |                |                |                 |        |
|   | ll Name (Last, Fir<br>chard Ariazi   | st, Middle Illitial)  |                            |                                    |                        |        |              |   | Date                            | of Di              | sburs        | : SB2<br>ement |                |                 | Y      |
| Mai   | iling Address  | PO Box 737  |                            |                                    |                        |        |              |   | 0 <sup>M</sup> 5                |                    | 1            | <sup>D</sup> 2 |                | ž 0 ŏ 8         |        |
| City<br>Mu  | y<br>undelein  |   | St<br>IL                   | ate<br>-                           | Zip Code<br>60060-0737 |        |              |   | Amou                            | ınt of             | Each         | Disbu          | -              | nt this F       | -      |
| Pet   | rpose of Disburse<br>titioning Expense<br>ndidate Name   |   |                            |                                    |                        |        | 001          |   | L.                              | •                  |              |                | 2              | 025.36          | )      |
|   |  |   | ,                          |                                    |                        |        | tego<br>Type |   |                                 |                    |              |                |                |                 |        |
| Offi  | fice Sought:   | House<br>Senate<br>President  |                            | ent For:<br>Primary<br>Other (spec | General cify) ▼        |        |              |   |                                 |                    |              |                |                |                 |        |
| Sta   | ate: D   | District:   |                            |                                    |                        |        |              |   |                                 |                    |              |                |                |                 |        |
| SUBT  | TOTAL of Disbur  | sements This Page   | e (optional)               |                                    |                        |        |              | • |                                 |                    |              |                | 38             | 316.86          | ;      |

C.

| SCHEDULE B (FEC Form 3X)  | OR LIN                             |                                 | R: |     |  | PA          | AGE  | 119       | 183 |           |      |                 |                    |           |
|---|------------------------------------|---------------------------------|----|-----|--|-------------|------|-----------|-----|-----------|------|-----------------|--------------------|-----------|
| ITEMIZED DISBURSEMENTS  |                                    | category of the<br>Summary Page |    | Ì   | _  | 22<br>28a   |      | 23<br>28b | F   | 24<br>28c |      | 25<br>29        | $\mathbf{\square}$ | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                    |                                 |    |     |  |             |      |           |     |           |      |                 | ;                  |           |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |                                    |                                 |    |     |  |             |      |           |     |           |      |                 |                    |           |
| Full Name (Last, First, Middle Initial) Richard Ariazi  |                                    |                                 |    |     |  | Date o      |      | sburs     |     |           |      | 5792<br>: 0 Ŏ 8 | Y                  |           |
| Mailing Address PO Box 737  | 21-1-                              | 7'- 0-4-                        |    |     |  |             | _    |           |     |           |      |                 |                    |           |
| ,   | State<br>IL                        | Zip Code<br>60060-0737          |    |     |  | Amou        | nt o | Each      | ı L | Disburse  | -    |                 | -                  | d<br>T    |
| Purpose of Disbursement Petitioning Expense Candidate Name  |                                    |                                 | Ca | ate | 01<br>egory/                                   | L.          |      | 0         |     |           |      | 785.6           | 5                  |           |
| Office Sought:  Senate President State:  Disburse   | ment For:<br>Primary<br>Other (spe | General                         |    | _   | <u>.                                      </u> |             |      |           |     |           |      |                 |                    |           |
| Full Name (Last, First, Middle Initial) Ask Your Tech, LLC  |                                    |                                 |    |     |  | Date o      |      | sburs     | en  |           |      |                 | Y                  |           |
| Mailing Address c/of Nick Zarzycki 6001 Arlington Blvd Apt.   | Т17                                |                                 |    |     |  | 0 5         |      |           | ) ( | 5         | 2    | 0 0 8           | 3                  |           |
| ,   | State<br>VA                        | Zip Code<br>22044-0000          |    |     |  | Amou        | nt o | f Each    | ı C | Disburse  | mer  | t this I        | Period             | t         |
| Purpose of Disbursement Computer Maint. And Repair Candidate Name   |                                    |                                 |    | -   | 01<br>egory/                                   |             |      |           |     | • •       |      | 360.0           | )                  |           |
|   |                                    |                                 |    |     | pe   |             |      |           |     |           |      |                 |                    |           |
| Office Sought: House Disburse Senate President State: District:   | ment For:<br>Primary<br>Other (spe | General cify) ▼                 |    |     |  |             |      |           |     |           |      |                 |                    |           |
| Full Name (Last, First, Middle Initial)   |                                    |                                 |    |     |  | Trans       | acti | on ID:    | :   | SB211     | 3.26 | 905             |                    |           |
| AT&T - Mobility  Mailing Address PO Box 6463  |                                    |                                 |    |     |  | Date of 0 5 | of D |           | en  |           | ( )  | 0 ŏ 8           | Y                  |           |
|   |                                    |                                 |    |     |  |             | _    |           |     |           |      |                 |                    |           |
|   | State<br>IL                        | Zip Code<br>60197-6463          |    |     |  | Amou        | nt o | f Each    | ı E | Disburse  | -    |                 |                    | d<br>T    |
| Purpose of Disbursement Cell Phone Services   |                                    |                                 |    | 0   | 01   |             |      |           |     |           |      | 186.7           | 3                  |           |
| Candidate Name  |                                    |                                 | Ca | ate | egory/<br>vpe                                  |             |      |           |     |           |      |                 |                    |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General cify) ▼                 |    |     |  |             |      |           |     |           |      |                 |                    |           |
| State: District:  |                                    | · · · ·                         |    |     |  |             |      |           |     |           |      |                 |                    |           |
| SUBTOTAL of Disbursements This Page (optional) .  |                                    |                                 |    |     | . •  |             |      |           |     |           | 18   | 32.3            | 3                  |           |

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| COMEDINE B /EEC Form 2V)  |  | 1                    |   |  |
|---|--|----------------------|---|--|
| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE (check only | NUMBER:<br>( one)                         | PAGE 120 / 183                           |
| TEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page         | X 21b 27             | 22 23                                     | 24 25 26<br>28c 29 30b                   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                      |   |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                      |   |  |
| Full Name (Last, First, Middle Initial) Authorize.net   |  |                      | Transaction ID: SID Date of Disbursemer   |  |
| Mailing Address 915 South 500 East Suite  | 200  |                      | 03 31                                     | 2008                                     |
|   | State         Zip Code           UT         84003-0000 |                      | Amount of Each Disk                       | oursement this Period                    |
| Purpose of Disbursement<br>Credit Card Processing Fee   |  | 001                  |   | 49.75                                    |
| Candidate Name  |  | Category/<br>Type    |   |  |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)              |                      |   |  |
| Full Name (Last, First, Middle Initial)   |  |                      |   | DO 1 D 1 D 1 D 1 D 1 D 1 D 1 D 1 D 1 D 1 |
| B & B Duplicators   |  |                      | Transaction ID: SI<br>Date of Disbursemer |  |
| Mailing Address 818 18th Street NW LL15   | j  |                      | 05 15                                     | Y 2008                                   |
| •   | State Zip Code DC 20006-0000                           |                      | Amount of Each Disk                       | oursement this Period                    |
| Purpose of Disbursement Non Candidate Party Printing  |  | 003                  |   | 4669.92                                  |
| Candidate Name  |  | Category/<br>Type    |   |  |
| Senate President  | ment For: Primary General Other (specify)              |                      |   |  |
| State: District:  |  |                      |   |  |
| Full Name (Last, First, Middle Initial) B & B Duplicators   |  |                      | Transaction ID: SI Date of Disbursemer    | nt                                       |
| Mailing Address 818 18th Street NW LL15   | 5  |                      | 05 7 3 1                                  | Y 2008                                   |
|   | State Zip Code DC 20006-0000                           |                      | Amount of Each Disk                       | oursement this Period                    |
| Purpose of Disbursement Non Candidate Party Printing and Mailing  |  | 003                  |   | 475.88                                   |
| Candidate Name  |  | Category/<br>Type    |   |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | .,,,,,               |   |  |
| State: District:  |  |                      |   |  |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                      |   | 5195.55                                  |

В.

C.

FE6AN026

| SCHEDULE B (FEC Form 3X)  |                                    | arate schedule(s)               |    |     |                     | LINE NUMBER: |           |        |           |            | PAGE 121 / 183 |      |              |                |           |
|---|------------------------------------|---------------------------------|----|-----|---------------------|--------------|-----------|--------|-----------|------------|----------------|------|--------------|----------------|-----------|
| ITEMIZED DISBURSEMENTS  |                                    | category of the<br>Summary Page |    | _   | 21b<br>27           | H            | 22<br>28a |        | 23<br>28b | Н          | 24<br>28c      |      | 25<br>29     |                | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                    |                                 |    |     |                     |              |           |        |           |            |                |      |              | 5              |           |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |                                    |                                 |    |     |                     |              |           |        |           |            |                |      |              |                |           |
| Full Name (Last, First, Middle Initial) Anna Benjamin   |                                    |                                 |    |     |                     | Date of      | of D      | on ID: | eme       |            |                | _    | V            |                |           |
| Mailing Address 626 W 47th St.  |                                    |                                 |    |     |                     |              | 0 5       | М      | ′         | ) <b>1</b> | ′ L'           | . 2  | 0 ŏ 8        | 3 '            |           |
| •   | State<br>IL                        | Zip Code<br>60609-0000          |    |     |                     |              | Amou      | int o  | f Each    | Dis        | burse          | -    |              |                | t<br>t    |
| Purpose of Disbursement Petitioning Expense Candidate Name  |                                    |                                 | Ca | ate | 01<br>egory/        |              |           | •      | •         |            |                | . 3  | 313.5        | 0              |           |
| Office Sought:  Senate President State:  Disburser  | ment For:<br>Primary<br>Other (spe | General cify) ▼                 |    |     |                     |              |           |        |           |            |                |      |              |                |           |
| Full Name (Last, First, Middle Initial) Anna Benjamin  Mailing Address 626 W 47th St.                     |                                    |                                 |    |     |                     |              | Date of   |        | ion ID:   | _          |                |      | 795<br>0 ố t | 3 Y            |           |
|   | State                              | Zip Code                        |    |     |                     |              | Amou      | ınt o  | f Each    | Dis        | burse          | nen  | t this       | Period         |           |
| Chicago  Purpose of Disbursement  | IL                                 | 60609-0000                      | _  | _   |                     |              |           | •      |           |            |                | 7    | 18.5         | 0              |           |
| Petitioning Expense Candidate Name  |                                    |                                 | Ca | ate | 01<br>egory/<br>/pe |              |           |        |           |            |                |      |              |                |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General ♥                       |    |     |                     |              |           |        |           |            |                |      |              |                |           |
| State: District: Full Name (Last, First, Middle Initial)  |                                    |                                 |    |     |                     |              |           |        | on ID:    |            |                | 3.26 | 796          |                |           |
| Anna Benjamin  Mailing Address 626 W 47th St.   |                                    |                                 |    |     |                     |              |           | of D   | isburse   | eme<br>2 8 | nt<br>/ Y      | ž    | 0 Ď 8        | 3 <sup>Y</sup> |           |
|   | State<br>IL                        | Zip Code<br>60609-0000          |    |     |                     |              | Amou      | int o  | f Each    | Dis        | burse          | men  | t this I     | Period         | d<br>b    |
| Purpose of Disbursement Petitioning Expense   |                                    |                                 |    | _   | 01                  |              | L.        |        |           |            |                | 23   | 305.5        | 0              |           |
| Candidate Name  Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General                         |    |     | egory/<br>/pe       |              |           |        |           |            |                |      |              |                |           |
| State: District:  | - Cirioi (3pe                      | y/ ▼                            |    |     |                     |              | _         | _      |           |            |                | _    |              |                | _         |
| SUBTOTAL of Disbursements This Page (optional)  |                                    |                                 |    |     | . •                 |              | L.        |        |           |            |                | 33   | 37.5         | 0              |           |

C.

| SCHEDULE B (FEC Form 3X)   | Use separate schedule(s)           |                                 |    |     |             | E N | UMBEI            | R:   |                |                     | РА        | GE   | 122 /    | 183   |           |
|--|------------------------------------|---------------------------------|----|-----|-------------|-----|------------------|------|----------------|---------------------|-----------|------|----------|-------|-----------|
| ITEMIZED DISBURSEMENTS   |                                    | category of the<br>Summary Page |    | X   | -           | H   | 22<br>28a        |      | 23<br>28b      | $oldsymbol{\sqcup}$ | 24<br>28c | Н    | 25<br>29 |       | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full) |                                    |                                 |    |     |             |     |                  |      |                |                     |           |      |          |       |           |
| LIBERTARIAN NATIONAL COMMITTEE   |                                    |                                 |    |     |             |     |                  |      |                |                     |           |      |          |       |           |
| Full Name (Last, First, Middle Initial) BentleyForbes Watergate LLC  |                                    |                                 |    |     |             |     | Transa<br>Date o |      | isburse        | emen                |           |      |          | V     |           |
| Mailing Address PO Box 73378   |                                    |                                 |    |     |             |     | 0 5              |      | 0              | 1<br>1              | Ĺ         | 2    | οŏε      | 3     |           |
| •  | State<br>OH                        | Zip Code<br>44193-3378          |    |     |             |     | Amou             | nt o | f Each         | Disb                | urse      | -    | -        | -     | d         |
| Purpose of Disbursement Office Rent, Tax, Maint & Utilities Candidate Name   |                                    |                                 |    | 00  | )1<br>gory/ |     | <u></u>          |      |                |                     |           | 97   | '17.58   | 3     |           |
|  |                                    |                                 |    |     | pe<br>pe    |     |                  |      |                |                     |           |      |          |       |           |
| Senate President   | ment For:<br>Primary<br>Other (spe | General ecify)                  |    |     |             |     |                  |      |                |                     |           |      |          |       |           |
| State: District: Full Name (Last, First, Middle Initial)   |                                    |                                 |    |     |             |     | Trans            | acti | on ID:         | SF                  | 321F      | 3.26 | 910      |       |           |
| BentleyForbes Watergate LLC  |                                    |                                 |    |     |             |     | Date o           |      | isburse        | emen                |           |      |          | Y     |           |
| Mailing Address PO Box 73378   |                                    |                                 |    |     |             |     | 0 5              |      | 1              | 3                   | Ĺ         | 2    | οŏε      | 3     |           |
| •  | State<br>OH                        | Zip Code<br>44193-3378          |    |     |             |     | Amoui            | nt o | f Each         | Disb                | urse      | men  | t this F | Perio | d         |
| Purpose of Disbursement Office Rent, Tax, Maint & Utilities  |                                    |                                 |    | 00  | 11          |     |                  |      |                |                     |           | 11   | 71.4     | 7     |           |
| Candidate Name   |                                    |                                 | Са | -   | gory/       |     |                  |      |                |                     |           |      |          |       |           |
| Office Sought: House Disburse Senate President State: District:  | ment For:<br>Primary<br>Other (spe | General ecify) ▼                |    |     |             |     |                  |      |                |                     |           |      |          |       |           |
| Full Name (Last, First, Middle Initial) Darryl Bonner  |                                    |                                 |    |     |             |     | Transa<br>Date o |      |                |                     |           | 3.26 | 797      |       |           |
| Mailing Address 6151 Reach Street  |                                    |                                 |    |     |             |     | 0 5              | М    | <sup>/</sup> 0 | 6                   | / Y       | ž    | 0 ŏ 8    | Y     |           |
|  | State<br>PA                        | Zip Code<br>19111-0000          |    |     |             |     | Amou             | nt o | f Each         | Disb                | urse      | men  | t this F | Perio | d         |
| Purpose of Disbursement Petitioning Expense  |                                    |                                 |    | 00  | )1          |     |                  |      |                |                     |           | 15   | 00.00    | )     |           |
| Candidate Name   |                                    |                                 | Са | ite | gory/<br>pe |     |                  |      |                |                     |           |      |          |       |           |
| Office Sought: House Disburse Senate President   | ment For:<br>Primary<br>Other (spe | General ecify) ▼                |    | ,   |             |     |                  |      |                |                     |           |      |          |       |           |
| State: District:   |                                    | • •                             |    |     |             |     |                  |      |                |                     |           |      |          |       |           |
| SUBTOTAL of Disbursements This Page (optional) .   |                                    |                                 |    |     | •           |     |                  |      |                |                     | 1         | 23   | 89.0     | 5     |           |

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| COUEDIN E B /EEC Form 2V)                                  |  |                       |  | 1                     |
|--|--|-----------------------|--|-----------------------|
| SCHEDULE B (FEC Form 3X)                                   | Use separate schedule(s)                       | FOR LINE<br>(check on | NUMBER:<br>lv one)                     | PAGE 123 / 183        |
| ITEMIZED DISBURSEMENTS                                     | for each category of the Detailed Summary Page | X 21b                 | 22 23 2                                | 24 25 26              |
| Any Information copied from such Reports and Statem        | lents may not be sold or used                  | by any person         |  | 28c 29 30b            |
| or for commercial purposes, other than using the name      |  |                       |  |                       |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE |  |                       |  |                       |
| Full Name (Last, First, Middle Initial)                    |  |                       | Transaction ID: S                      | R21R 26708            |
| Darryl Bonner  |  |                       | Date of Disbursemer                    |                       |
| Mailing Address 6151 Reach Street                          |  |                       | 05 13                                  | 2008                  |
| ,  | State Zip Code<br>PA 19111-0000                |                       | Amount of Each Disk                    | oursement this Period |
| Purpose of Disbursement                                    | 10111 0000                                     | •                     |  | 2032.50               |
| Petitioning Expense Candidate Name                         |  | 001                   |  |                       |
| Candidate Name   |  | Category/<br>Type     |  |                       |
| Office Sought: House Disburse Senate President             | ment For: Primary General Other (specify)      |                       |  |                       |
| State: District:   |  |                       |  |                       |
| Full Name (Last, First, Middle Initial)                    |  |                       | Transaction ID: S                      |                       |
| Darryl Bonner  |  |                       | Date of Disbursemer                    |                       |
| Mailing Address 6151 Reach Street                          |  |                       | 05 / 21                                | Y 2008                |
| City<br>Philadelphia                                       | State Zip Code<br>PA 19111-0000                |                       | Amount of Each Disk                    | oursement this Period |
| Purpose of Disbursement                                    | 10111 0000                                     | -                     |  | 2250.00               |
| Petitioning Expense Candidate Name                         |  | 001                   |  |                       |
| Candidate Name   |  | Category/<br>Type     |  |                       |
| Office Sought: House Disburse Senate President             | ment For: Primary General Other (specify)      |                       |  |                       |
| State: District:   |  |                       |  |                       |
| Full Name (Last, First, Middle Initial) Darryl Bonner      |  |                       | Transaction ID: S  Date of Disbursemer |                       |
| Mailing Address 6151 Reach Street                          |  |                       | 05 29                                  | 2 0 0 8 Y             |
|  | 01-1- 7- 0-1-                                  |                       |  |                       |
|  | State Zip Code<br>PA 19111-0000                |                       | Amount of Each Dist                    | oursement this Period |
| Purpose of Disbursement Petitioning Expense                |  | 001                   |  | 4121.70               |
| Candidate Name   |  | Category/             |  |                       |
| Office Sought: House Disburse                              | ment For:                                      | Туре                  |  |                       |
| Senate   | Primary General                                |                       |  |                       |
| State: District:   | Other (specify)                                |                       |  |                       |
| <u> </u>   |  |                       |  | 8404.20               |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .    |  |                       |  | 0404.20               |

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|---|--|--------------------------|--|
| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE (check only     |  |
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | X 21b 27                 | 22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |  |
| NAME OF COMMITTEE (In Full)   | tana address of any pointed to                         |                          | ion contributions from such committee  |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                          |  |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: SB21B.26802  |
| William B. Buchwald   |  |                          | Date of Disbursement   |
| Mailing Address 2607 Arctic Blvd.   |  |                          | $\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} & \begin{bmatrix} D \\ D \end{smallmatrix} & \begin{bmatrix} V \\ D \end{smallmatrix} & \begin{bmatrix} V$ |
| •   | State Zip Code<br>AK 99503-0000                        |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |  | 004                      | 1170.00  |
| Petitioning Expense Candidate Name  |  | 001<br>Category/<br>Type |  |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)              | 71                       |  |
| Full Name (Last, First, Middle Initial)   |  |                          | Turness than ID CD04D 00000  |
| Louise Calise   |  |                          | Transaction ID: SB21B.26806 Date of Disbursement   |
| Mailing Address 6802 Dante Ct.  |  |                          | $\begin{bmatrix}\begin{smallmatrix}M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D & 1 & 0 \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y & 2 & 0 & 0 & 8 \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$   |
| City  | State Zip Code   |                          | Amount of Each Disbursement this Period  |
| 1 0   | VA 22152-3328  |                          | 418.35   |
| Purpose of Disbursement<br>Reimbursement Travel - Air(See Memo)   |  | 002                      | 410.33   |
| Candidate Name  |  | Category/<br>Type        |  |
| Senate President  | ment For: Primary General Other (specify)              |                          |  |
| State: District: Full Name (Last, First, Middle Initial)  |  |                          |  |
| Frontier Airlines   |  |                          | Transaction ID: SB21B.26806.0 Date of Disbursement   |
| Mailing Address 7001 Tower Road   |  |                          | 0 5 M / D 1 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|   | State         Zip Code           CO         80249-7312 |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Employee Travel Expenses-Air  |  | 000                      | 418.35   |
| Candidate Name  |  | 002<br>Category/         |  |
|   |  | Туре                     | [MEMO ITEM]  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              |                          | [MEMOTIEM]   |
| State: District:  | (- y) <b>▼</b>   |                          |  |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                          | 1588.35  |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)   | FOR LINE          |                                       | PAGE 125/183                   |  |  |  |  |  |  |
|---|--|-------------------|---------------------------------------|--------------------------------|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page  (check of X 21b 27 |                   | one)<br>22 23 2<br>28a 28b            | 24 25 26<br>28c 29 30b         |  |  |  |  |  |  |
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| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  | <u> </u>   |                   |                                       |                                |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |                                       |                                |  |  |  |  |  |  |
| Louise Calise   |  |                   | Transaction ID: 3                     | ent                            |  |  |  |  |  |  |
| Mailing Address 6802 Dante Ct.  |  |                   | 05 14                                 | y žošs                         |  |  |  |  |  |  |
| City<br>Springfield   | State Zip Code<br>VA 22152-3328                                    |                   | Amount of Each Di                     | sbursement this Period         |  |  |  |  |  |  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001               |                                       | 1286.82                        |  |  |  |  |  |  |
| Candidate Name  |  | Category/<br>Type |                                       |                                |  |  |  |  |  |  |
| Senate President  | ement For: Primary General Other (specify)                         |                   |                                       |                                |  |  |  |  |  |  |
| State: District:  |  |                   |                                       |                                |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Louise Calise   |  |                   | Transaction ID: 3                     | ent                            |  |  |  |  |  |  |
| Mailing Address 6802 Dante Ct.  |  |                   | 05 / 28                               | <sup>'</sup> 2008              |  |  |  |  |  |  |
| City<br>Springfield   | State         Zip Code           VA         22152-3328             |                   | Amount of Each Di                     | sbursement this Period         |  |  |  |  |  |  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001               |                                       | 1286.81                        |  |  |  |  |  |  |
| Candidate Name  |  | Category/<br>Type |                                       |                                |  |  |  |  |  |  |
| Office Sought: House Disburs Senate President   | ement For: Primary General Other (specify)                         |                   |                                       |                                |  |  |  |  |  |  |
| State: District:  |  |                   |                                       |                                |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Louise Calise   |  |                   | Transaction ID: State of Disbursement | ent                            |  |  |  |  |  |  |
| Mailing Address 6802 Dante Ct.  |  |                   | 05 / 29                               | <sup>'</sup> 2008 <sup>'</sup> |  |  |  |  |  |  |
| City<br>Springfield   | State Zip Code VA 22152-3328                                       |                   | Amount of Each Di                     | sbursement this Period         |  |  |  |  |  |  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001               |                                       | 2000.00                        |  |  |  |  |  |  |
| Candidate Name  |  | Category/<br>Type |                                       |                                |  |  |  |  |  |  |
| Senate President  | ement For: Primary General Other (specify)                         |                   |                                       |                                |  |  |  |  |  |  |
| State: District:  |  |                   |                                       |                                |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)  |  |                   |                                       | 4573.63                        |  |  |  |  |  |  |

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| SCHEDULE B (FEC Form 3X)  | Use separate scriedule(s)   /abaala                    |          |                        |          | NUMBE            | R:           |                  |             | PAG     | GE 12       | 26 / 1   | 83        |
|---|--|----------|------------------------|----------|------------------|--------------|------------------|-------------|---------|-------------|----------|-----------|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page         |          | (check<br>X 21b<br>27  | Ė        | 22<br>28a        | П            | 23<br>28b        | P 24        | 1<br>3c | 25          |          | 26<br>30b |
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| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |          |                        |          |                  |              |                  |             |         |             |          |           |
| Full Name (Last, First, Middle Initial) Carefirst CapitalCare (Robert)  Mailing Address PO Box 79749  |  |          | Date                   |          | sburs            | SB2<br>ement | 21B.             | 2691<br>Ž 0 |         | ]           |          |           |
|   | State Zip Code MD 21279-0749                           |          |                        |          | Amou             | ınt o        | Each             | Disbu       | rsem    | nent th     | is Pe    | riod      |
| Purpose of Disbursement Employee Medical Insurance Candidate Name   |  | Ca       | 001<br>tegory/<br>Type |          | L.               |              |                  |             | •       | 103         | 3.00     |           |
| Office Sought:  Senate President State:  Disburse   | ment For: Primary General Other (specify)              | <u> </u> | , , , , ,              |          |                  |              |                  |             |         |             |          |           |
| Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions  Mailing Address 21205 Ridgetop Circle  |  |          |                        |          |                  |              | sburs            | SB2         | 21B.    | 2691<br>Ž 0 |          | ]         |
| •   | State Zip Code<br>VA 20166-6501                        |          |                        |          | Amou             | ınt o        | Each             | Disbu       | rsem    | nent th     | is Pe    | riod      |
| Purpose of Disbursement Copier Maint Candidate Name   |  | Ca       | 001<br>tegory/         |          | L.               |              |                  |             | 0       | 116         | 5.33     |           |
| Office Sought:  Senate President  State:  Disburser   | ment For: Primary General Other (specify) ▼            |          | Гуре                   |          |                  |              |                  |             |         |             |          |           |
| Full Name (Last, First, Middle Initial) Ronald Cook   |  |          |                        |          |                  |              |                  | : SB2       | 21B.    | .2680       | 7        |           |
| Mailing Address 1838 Powderhorn Ln.   |  |          |                        |          | 0 <sup>M</sup> 5 | М            | <sup>′</sup> □ C | 9 /         | Y       | ž o         | 8 0      |           |
| Katy  | State         Zip Code           TX         77493-0000 |          |                        |          | Amou             | ınt o        | Each             | Disbu       |         |             | -        | riod      |
| Purpose of Disbursement Petitioning Expense Candidate Name  |  | Ca       | 001<br>tegory/         |          |                  |              | •                |             |         | 2126        | . 19     |           |
| Office Sought: House Disburser Senate President   | ment For: Primary General Other (specify) ▼            | ר        | Гуре                   |          |                  |              |                  |             |         |             |          |           |
| State: District:  | · · · · · · · · · · · · · · · · · · ·                  |          |                        |          |                  |              |                  | •           |         | 0045        | <b>.</b> |           |
| SUBTOTAL of Disbursements This Page (optional)  |  |          | <u>I</u>               | <u> </u> |                  |              | _                |             |         | 2345        | .52      |           |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s                           |          | FOR LIN                  |           |                |           | P                        | AGE   | 127 /        | 183                            |
|---|---|----------|--------------------------|-----------|----------------|-----------|--------------------------|-------|--------------|--------------------------------|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page | 1 -      | (check or<br>X 21b<br>27 | 22<br>28  | : [            | 23<br>28b | 24<br>28c                | П     | 25<br>29     | 26<br>30b                      |
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| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |   |          |                          |           |                |           |                          |       |              |                                |
|   | e<br>State Zip Code<br>MN 55347-0000              | )        |                          | Da<br>0   | te of          | Disburs   | : SB21<br>ement<br>) 1 / | ž     | o ŏ 8        |                                |
| Purpose of Disbursement LP.org webmaster Candidate Name   |   | Cat      | 001<br>egory/<br>ype     |           |                |           |                          | 6     | 00.00        | )                              |
| Senate President State: District:   | ement For: Primary General Other (specify)        |          |                          |           |                |           |                          |       |              |                                |
| Full Name (Last, First, Middle Initial) Shane Cory  Mailing Address 5 Burwell Place                       |   |          |                          | Da        | te of          | Disburs   | SB21 ement               |       | 808<br>0 ŏ 8 | Y                              |
| ,   | State Zip Code<br>VA 22554-000                    | <b>1</b> |                          | An        | nount          | of Each   | Disburse                 | ement | this F       | Period                         |
| Purpose of Disbursement Employee Net Pay Candidate Name   | 22004 0000  | Cat      | 001<br>egory/<br>ype     |           | •              |           |                          | 31    | 56.95        | 5                              |
| Office Sought: House Senate President State: District:  | ement For: Primary General Other (specify)        | •        |                          |           |                |           |                          |       |              |                                |
| Full Name (Last, First, Middle Initial) Shane Cory  |   |          |                          | Da        | te of          | Disburs   |                          |       |              |                                |
| Mailing Address 5 Burwell Place   |   |          |                          | O O       | 5 <sup>M</sup> | / D       | 4                        | ž     | o ŏ e        | Y                              |
| Stafford  | State Zip Code<br>VA 22554-0000                   | )        |                          | An        | nount          | of Each   | Disburse                 | -     | this F       | -                              |
| Purpose of Disbursement Employee Net Pay Candidate Name   |   | Cat      | 001<br>egory/<br>ype     |           |                |           |                          | 7 11  | J-1.00       | <u></u>                        |
| Office Sought: House Disburse Senate President State: District:   | ement For: Primary General Other (specify)        |          |                          |           |                |           |                          |       |              |                                |
| SUBTOTAL of Disbursements This Page (optional) .  |   |          | •                        |           |                |           |                          | 1094  | 40.95        | 5                              |

|           |   | 3 (FEC Form 3X) SBURSEMENTS                                      | for each                       | earate schedule(s) category of the | (check onl        | <u> </u>                    |              | AGE 128      | / 183          |
|-----------|---|--|--------------------------------|------------------------------------|-------------------|-----------------------------|--------------|--------------|----------------|
|           |   |  |                                | Summary Page                       | X 21b 27          |                             | 8b 28c       |              | Н              |
|           |   | ed from such Reports and Stat<br>rposes, other than using the na |                                |                                    |                   |                             |              |              | 8              |
| $\rangle$ | NAME OF COMI<br>LIBERTARIAN                           | MITTEE (In Full)<br>I NATIONAL COMMITTEE                         | <u> </u>                       |                                    |                   |                             |              |              |                |
|           | Full Name (Last,<br>Shane Cory                        | First, Middle Initial)   |                                |                                    |                   | Transaction<br>Date of Disk | oursement    | B.26810      |                |
|           | Mailing Address                                       | 5 Burwell Place  |                                |                                    |                   | 05                          | 28           | Ý ŽOŠ        | 3 <sup>Y</sup> |
|           | City<br>Stafford                                      |  | State<br>VA                    | Zip Code<br>22554-0000             |                   | Amount of E                 | ach Disburs  |              |                |
|           | Purpose of Disbu<br>Employee Net Pa<br>Candidate Name |  |                                |                                    | 001               |                             |              | 3156.9       | 4              |
|           |   |  |                                |                                    | Category/<br>Type |                             |              |              |                |
|           | Office Sought:  | Senate President   | rsement For: Primary Other (sp | General ecify) ▼                   |                   |                             |              |              |                |
|           | State:  | District: First, Middle Initial)                                 |                                |                                    |                   | <b>T</b>                    | ID ODG       | D 00017      |                |
|           | Craft Agency,   | ,  |                                |                                    |                   | Transaction<br>Date of Disk | oursement    |              |                |
|           | Mailing Address                                       | PO Box 1187<br>2533 Spring Aarbor Ro                             | I.                             |                                    |                   | 05                          | 06 /         | žoŏs         | 3 <sup>Y</sup> |
|           | City<br>Jackson                                       |  | State<br>MI                    | Zip Code<br>49204-1187             |                   | Amount of E                 | ach Disburs  | ement this I | Perio          |
|           | Purpose of Disbu<br>D&O Insurance I<br>Candidate Name |  |                                |                                    | 001<br>Category/  |                             |              | 2370.7       | 5              |
|           | 0(6 0   | Dist.  |                                |                                    | Туре              |                             |              |              |                |
|           | Office Sought:  | Senate President   | rsement For: Primary Other (sp | General ecify) ▼                   |                   |                             |              |              |                |
|           | State: Full Name (Last, Andrew R Dav                  | District: First, Middle Initial) is                              |                                |                                    |                   | Transaction Date of Disk    |              | B.26811      |                |
|           | Mailing Address                                       | 1639 Longleaf Dr.  |                                |                                    |                   | 05                          | 14           | ŽOÕE         | 3 <sup>Y</sup> |
|           | City<br>Myrtle Beach                                  |  | State<br>SC                    | Zip Code<br>29575-5400             |                   | Amount of E                 | Each Disburs |              |                |
|           | Purpose of Disbu<br>Employee Net Pa                   |  |                                |                                    | 001               |                             |              | 1115.7       | 3              |
|           | Candidate Name  |  |                                |                                    | Category/<br>Type |                             |              |              |                |
|           | Office Sought:  | House Disbu Senate President                                     | Primary Other (sp              | General                            |                   |                             |              |              |                |
|           | State:  | District:  |                                |                                    |                   |                             |              |              |                |
|           |   |  | al)                            |                                    |                   |                             |              | 6643.42      | 2              |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s  | FOR LINE                 | NUMBER: PAGE 129 / 183  |  |  |  |  |  |
|---|--|--------------------------|---|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS  | MIZED DISBURSEMENTS  for each category of the Detailed Summary Page    X   21b   27  |                          | 22 23 24 25 26<br>28a 28b 28c 29 30b  |  |  |  |  |  |
| or for commercial purposes, other than using the name                                     | Any Information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so   |                          |   |  |  |  |  |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE                                |  |                          |   |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Andrew R Davis  Mailing Address 1639 Longleaf Dr. | Transaction ID: SB21B.26812 Date of Disbursement  Description of D |                          |   |  |  |  |  |  |
|   | State Zip Code SC 29575-5400   |                          | Amount of Each Disbursement this Period   |  |  |  |  |  |
| Purpose of Disbursement<br>Employee Net Pay<br>Candidate Name                             |  | 001<br>Category/<br>Type | 1131.32   |  |  |  |  |  |
| Office Sought: House Disburse Senate President State: District:                           | ement For: Primary General Other (specify)   |                          |   |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Andrew R Davis                                    |  |                          | Transaction ID: SB21B.26813 Date of Disbursement  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |  |  |  |
| Mailing Address 1639 Longleaf Dr.   | State Zip Code   |                          | Amount of Each Disbursement this Period   |  |  |  |  |  |
| Myrtle Beach  | SC 29575-5400  |                          | 1500.00   |  |  |  |  |  |
| Purpose of Disbursement Employee Net Pay Candidate Name                                   |  | 001<br>Category/<br>Type |   |  |  |  |  |  |
| Office Sought:    House   Disburse     Senate   President     State: District:            | ement For: Primary General Other (specify)   | Туре                     |   |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Mike Davis  |  |                          | Transaction ID: SB21B.26814 Date of Disbursement  |  |  |  |  |  |
| Mailing Address 65 Duval Rd.  |  |                          | 05 06 7 2008  |  |  |  |  |  |
| Winterhaven   | State         Zip Code           FL         33884-0000   |                          | Amount of Each Disbursement this Period 669.00  |  |  |  |  |  |
| Purpose of Disbursement Petitioning Expense Candidate Name                                |  | 001<br>Category/<br>Type | 009.00  |  |  |  |  |  |
| Office Sought: House Disburse Senate President  | ement For: Primary General Other (specify)   | , , , ,                  |   |  |  |  |  |  |
| State: District:  | (- poon)/ <b>\</b>   |                          |   |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional) .  |  | <b></b>                  | 3300.32   |  |  |  |  |  |

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| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the      | (check only              |  |
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| . Limely biobolicement  | Detailed Summary Page                                  | X 21b 27                 | 22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and State or for commercial purposes, other than using the nar |  |                          |  |
| NAME OF COMMITTEE (In Full)   |  |                          |  |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                          |  |
| Full Name (Last, First, Middle Initial)<br>Mike Davis   |  |                          | Transaction ID: SB21B.26815 Date of Disbursement   |
| Mailing Address 65 Duval Rd.  |  |                          | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$ |
| City<br>Winterhaven   | State Zip Code<br>FL 33884-0000                        |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Petitioning Expense   |  | 001                      | 466.50   |
| Candidate Name  |  | Category/<br>Type        |  |
| Office Sought: House Disburs Senate President State: District:  | sement For: Primary General Other (specify)            | 71                       |  |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: CD01D 06016  |
| Mike Davis  |  |                          | Transaction ID: SB21B.26816 Date of Disbursement   |
| Mailing Address 65 Duval Rd.  |  |                          | $\begin{bmatrix}\begin{smallmatrix}M&M&M\\D&S&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\D&G&D\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\D&D&D&S\end{smallmatrix}\end{bmatrix}$   |
| City<br>Winterhaven   | State Zip Code<br>FL 33884-0000                        |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   | 12 00004 0000  |                          | 609.50   |
| Petitioning Expense Candidate Name  |  | 001<br>Category/<br>Type |  |
| Senate<br>President   | sement For: Primary General Other (specify) ▼          | ,                        |  |
| State: District:  Full Name (Last, First, Middle Initial)   |  |                          | T  |
| DC Office of Tax & Revenue  |  |                          | Transaction ID: SB21B.26918 Date of Disbursement   |
| Mailing Address 941 North Capitol St, N   | E 6th Flr  |                          | $\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$     |
| City<br>Washington  | State         Zip Code           DC         20002-0000 |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement DC - Admin. Funding Assessment  |  | 001                      | 3.80   |
| Candidate Name  |  | Category/<br>Type        |  |
| Office Sought: House Disburr<br>Senate President  | sement For: Primary General Other (specify)            |                          |  |
| State: District:  |  |                          |  |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE (check only     | NUMBER:                               | PAGE 131 / 183                 |
|---|--|--------------------------|---------------------------------------|--------------------------------|
| TEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page         | X 21b 27                 | 22 23 28a 28b                         | 24 25 26<br>28c 29 30b         |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |                                       |                                |
| NAME OF COMMITTEE (In Full)   | , , , , , , , , , , , , , , , , , , ,                  |                          |                                       |                                |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                          |                                       |                                |
| Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue  |  |                          | Transaction ID: S Date of Disbursemer | nt                             |
| Mailing Address 941 North Capitol St, NE  | 6th Fir  |                          | 05 13                                 | Ý 2008 <sup>°</sup>            |
| •   | State Zip Code DC 20002-0000                           |                          | Amount of Each Disk                   | oursement this Period          |
| Purpose of Disbursement DC - Unemployment Company   |  | 001                      |                                       | 24.71                          |
| Candidate Name  |  | Category/<br>Type        |                                       |                                |
| Senate President  | ment For: Primary General Other (specify)              |                          |                                       |                                |
| State: District:  |  |                          |                                       |                                |
| Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue  |  |                          | Transaction ID: S Date of Disbursemer | nt                             |
| Mailing Address 941 North Capitol St, NE  | 6th Flr  |                          | 05 7 27                               | Ž O Ď 8 Š                      |
| •   | State         Zip Code           DC         20002-0000 |                          | Amount of Each Disk                   | oursement this Period          |
| Purpose of Disbursement DC - Admin. Funding Assessment  |  | 001                      |                                       | 2.42                           |
| Candidate Name  |  | 001<br>Category/<br>Type |                                       |                                |
| Senate President  | ment For: Primary General Other (specify)              |                          |                                       |                                |
| State: District: Full Name (Last, First, Middle Initial)  |  |                          |                                       |                                |
| DC Office of Tax & Revenue  |  |                          | Transaction ID: S Date of Disbursemer | nt                             |
| Mailing Address 941 North Capitol St, NE  | 6th Flr  |                          | 05 / 27                               | <sup>'</sup> 2008 <sup>'</sup> |
|   | State Zip Code<br>DC 20002-0000                        |                          | Amount of Each Disk                   | oursement this Period          |
| Purpose of Disbursement DC - Unemployment Company   |  | 001                      |                                       | 15.75                          |
| Candidate Name  |  | Category/<br>Type        |                                       |                                |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | . 71-2                   |                                       |                                |
| State: District:  | - \-r J/ <b>V</b>                                      |                          |                                       |                                |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                          |                                       | 42.88                          |

C.

| OOLIEDIU E D (EEO E OV)  |  |                      |  |                       |
|--|--|----------------------|--|-----------------------|
| SCHEDULE B (FEC Form 3X)   | Use separate schedule(s)                       | FOR LINE (check only |  | PAGE 132 / 183        |
| TEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page | X 21b                | 22 23                                  | 24 25 26              |
| Any Information copied from such Reports and Statem                | ents may not be sold or used                   | by any person f      |  | 28c 29 30b            |
| or for commercial purposes, other than using the name              |  |                      |  |                       |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE         |  |                      |  |                       |
| Full Name (Last, First, Middle Initial)                            |  |                      | Transaction ID: S                      | B21B.26922            |
| DC Office of Tax & Revenue   |  |                      | Date of Disbursemer                    |                       |
| Mailing Address 941 North Capitol St, NE                           | 6th Flr  |                      | 05 / 28                                | 2008                  |
| •  | State Zip Code DC 20002-0000                   |                      | Amount of Each Disk                    | oursement this Period |
| Purpose of Disbursement  |  |                      |  | 1.10                  |
| DC - Admin. Funding Assessment Candidate Name                      |  | 001<br>Category/     |  |                       |
|  |  | Туре                 |  |                       |
| Office Sought: House Disburse Senate                               | ment For:  Primary General                     |                      |  |                       |
| President  | Other (specify)                                |                      |  |                       |
| State: District:   |  |                      |  |                       |
| Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue |  |                      | Transaction ID: SI Date of Disbursemer |                       |
| Moiling Address Odd North Oc. 11 TO NE                             | OIL EL   |                      | 05 D D D D                             | 2008°                 |
| Mailing Address 941 North Capitol St, NE                           | 6th Fir  |                      | 20                                     | 2000                  |
| •  | State Zip Code DC 20002-0000                   |                      | Amount of Each Disk                    | oursement this Period |
| Purpose of Disbursement  | 20002 0000                                     |                      |  | 7.15                  |
| DC - Unemployment Company Candidate Name                           |  | 001                  |  |                       |
| Candidate Name   |  | Category/<br>Type    |  |                       |
| - H  | ment For:                                      |                      |  |                       |
| Senate President   | Primary General Other (specify) ▼              |                      |  |                       |
| State: District:   |  |                      |  |                       |
| Full Name (Last, First, Middle Initial)  Jack Degenstein           |  |                      | Transaction ID: SI Date of Disbursemer |                       |
|  |  |                      | M M / D D                              | 2008                  |
| Mailing Address 6251 Collins Way                                   |  |                      | 05 30                                  | 2008                  |
|  | State Zip Code<br>AK 99502-0000                |                      | Amount of Each Disk                    | oursement this Period |
| Purpose of Disbursement  | AK 99302-0000                                  |                      |  | 1158.75               |
| Petitioning Expense  |  | 001                  |  |                       |
| Candidate Name   |  | Category/<br>Type    |  |                       |
| ÿ H  | ment For:                                      |                      |  |                       |
| Senate   President   | Primary General Other (specify) ▼              |                      |  |                       |
| State: District:   | (-p-50)/ <b>*</b>                              |                      |  |                       |
| SUBTOTAL of Disbursements This Page (optional) .                   |  |                      |  | 1167.00               |

C.

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE          | NUMBER:   | PAGE 133 / 183                 |
|---|---|-------------------|---|--------------------------------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only       | one)  |                                |
|   | Detailed Summary Page                             | X 21b 27          | 22 23<br>28a 28b  | 24 25 26<br>28c 29 30b         |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |   |                                |
| NAME OF COMMITTEE (In Full)   | e and address of any political of                 | committee to soi  | icit contributions from   | such committee                 |
| LIBERTARIAN NATIONAL COMMITTEE  |   |                   |   |                                |
| Full Name (Last, First, Middle Initial) Denver LPCON 2008, LLC  |   |                   | Transaction ID: S   |                                |
| Mailing Address 4404 S. Arden Ave.  |   |                   | $\begin{bmatrix} 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 2 \end{bmatrix}$ | Y 2008                         |
| Attn: BetteRose Ryan  | State Zip Code                                    |                   | Amount of Each Dis  | sbursement this Period         |
| Sioux Falls   | SD 57103-0000                                     |                   |   |                                |
| Purpose of Disbursement Convention Reception and Dinner Employee  |   | 001               |   | 750.00                         |
| Candidate Name  |   | Category/<br>Type |   |                                |
| Senate President  | ment For: Primary General Other (specify)         |                   |   |                                |
| State: District:  |   |                   |   |                                |
| Full Name (Last, First, Middle Initial) Susan M Dickson   |   |                   | Transaction ID: S Date of Disbursement  | ent                            |
| Mailing Address 3410 Vineland Place   |   |                   | 05 14   | 2008                           |
| •   | State Zip Code<br>VA 22026-0000                   |                   | Amount of Each Dis  | sbursement this Period         |
| Purpose of Disbursement   | VA 22020-0000                                     |                   |   | 925.05                         |
| Employee Net Pay Candidate Name   |   | 001               |   |                                |
|   |   | Category/<br>Type |   |                                |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) ▼       |                   |   |                                |
| State: District:  |   |                   |   |                                |
| Full Name (Last, First, Middle Initial) Susan M Dickson   |   |                   | Transaction ID: S Date of Disburseme  | ent                            |
| Mailing Address 3410 Vineland Place   |   |                   | 05 7 28   | <sup>'</sup> 2008 <sup>'</sup> |
|   | State Zip Code<br>VA 22026-0000                   |                   | Amount of Each Dis  | sbursement this Period         |
| Purpose of Disbursement<br>Employee Net Pay   |   | 001               |   | 925.06                         |
| Candidate Name  |   | Category/<br>Type |   |                                |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)         | . , , , ,         |   |                                |
| State: District:  | · · · · · · · · · · · · · · · · · · ·             |                   |   |                                |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <b>&gt;</b>       |   | 2600.11                        |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE                 |   |
|---|--|--------------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page         | (check only 21b 27       | 22  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                          |   |
| Full Name (Last, First, Middle Initial)<br>Susan M Dickson  |  |                          | Transaction ID: SB21B.26821<br>Date of Disbursement   |
| Mailing Address 3410 Vineland Place   |  |                          | $ \begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} $ $ \begin{bmatrix} 0.5 & M \\ 0.5$ |
|   | State Zip Code<br>VA 22026-0000                        |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                      | 1500.00   |
| Candidate Name  |  | Category/<br>Type        |   |
| Senate President  | ment For: Primary General Other (specify)              | 71                       |   |
| State: District:  |  |                          |   |
| Full Name (Last, First, Middle Initial) DirectMail.com  |  |                          | Transaction ID: SB21B.26926 Date of Disbursement  |
| Mailing Address 5511 Ketch Road Attn: Beverly Kalbaugh  |  |                          | $ \begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 1 & 5 \\ 0 & 1 & 5 \end{bmatrix} $ $ \begin{bmatrix} 0 & 1 & 5 \\ 0 & 2 & 0 & 0 & 8 \end{bmatrix} $  |
| City  | State         Zip Code           MD         20678-0000 |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |  | 000                      | 2970.26   |
| Non Candidate Party Printing and Mailing  Candidate Name  |  | 003<br>Category/<br>Type |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | Туре                     |   |
| State: District:  |  |                          |   |
| Full Name (Last, First, Middle Initial) DirectMail.com  |  |                          | <b>Transaction ID:</b> SB21B.26927 Date of Disbursement   |
| Mailing Address 5511 Ketch Road Attn: Beverly Kalbaugh  |  |                          | $\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 0 & 3 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 0 & 0 & 8 \\ Y & 2 & 0 & 0 & 8 \end{bmatrix} $   |
| City  | State Zip Code<br>MD 20678-0000                        |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Non Candidate Party Printing and Mailing  |  | 003                      | 175.00  |
| Candidate Name  |  | Category/<br>Type        |   |
| Senate President  | ment For: Primary General Other (specify)              |                          |   |
| State: District:  |  |                          |   |
| SURTOTAL of Dishursements This Page (ontional)  |  |                          | 4645.26   |

C.

| SCHEDULE B (FEC Form 3X)  |  | LEODINE              | \!!!!\!DED                            | DAGE 405 / 400         |
|---|--|----------------------|---------------------------------------|------------------------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the      | FOR LINE (check only |                                       | PAGE 135 / 183         |
| TEMIZED DISBONSEMENTS   | Detailed Summary Page                                  | X 21b 27             | 22 23 28b 28b                         | 24 25 26<br>28c 29 30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  | by any person f      | or the purpose of solicit             | ing contributions      |
| NAME OF COMMITTEE (In Full)   | and dudress of drip pointed                            |                      | not contributions from s              | don dominitied         |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                      |                                       |                        |
| Full Name (Last, First, Middle Initial)<br>Elyse Dorsey   |  |                      | Transaction ID: S Date of Disbursemen |                        |
| Mailing Address 5 Brittany Ct   |  |                      | 05  30                                | <sup>2</sup> 2008      |
|   | State Zip Code CT 06410-3749                           |                      | Amount of Each Disl                   | oursement this Period  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                  |                                       | 384.00                 |
| Candidate Name  |  | Category/<br>Type    |                                       |                        |
| Senate President  | ment For: Primary General Other (specify)              | ,,                   |                                       |                        |
| State: District:  |  |                      |                                       |                        |
| Full Name (Last, First, Middle Initial) Paula Edwards   |  |                      | Transaction ID: S Date of Disbursemen | nt                     |
| Mailing Address 1200 G Street, N.W. Suit  | e 800  |                      | 05 01                                 | <sup>2</sup> 2008      |
| •   | State         Zip Code           DC         20005-0000 |                      | Amount of Each Disl                   | bursement this Period  |
| Purpose of Disbursement Fec Filing and Amendments for 08  |  | 001                  |                                       | 1000.00                |
| Candidate Name  |  | Category/<br>Type    |                                       |                        |
| Senate President  | ment For: Primary General Other (specify)              | 71                   |                                       |                        |
| State: District: Full Name (Last, First, Middle Initial)  |  |                      |                                       |                        |
| Tomislav Fijacko  |  |                      | Transaction ID: S Date of Disbursemen | nt                     |
| Mailing Address 62 Mohegan Rd.  |  |                      | 05 14                                 | 2008                   |
|   | State Zip Code<br>NY 10538-0000                        |                      | Amount of Each Disl                   | oursement this Period  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                  |                                       | 46.17                  |
| Candidate Name  |  | Category/<br>Type    |                                       |                        |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | 71                   |                                       |                        |
| State: District:  | - (-ir J) <b>V</b>                                     |                      |                                       |                        |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                      |                                       | 1430.17                |

В.

C.

| SCHEDULE B (FEC Form 3X)   | Use separate schedule(s)                               |                          | IE NUMBER: PAGE 136 / 1             |  |  |  |  |  |  |  |
|--|--|--------------------------|-------------------------------------|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS   | for each category of the                               | (check only              |                                     |  |  |  |  |  |  |  |
|  | Detailed Summary Page                                  | X 21b 27                 | 22 23<br>28a 28b                    | 24 25 26<br>28c 29 30b                 |  |  |  |  |  |  |
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| or for commercial purposes, other than using the name                          | e and address of any political co                      | mmittee to soli          | cit contributions fro               | om such committee                      |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)  |  |                          |                                     |  |  |  |  |  |  |  |
| LIBERTARIAN NATIONAL COMMITTEE   |  |                          |                                     |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>Financial Agent Federal Tax Deposit |  |                          | Transaction ID:<br>Date of Disburse | SB21B.26928<br>ement                   |  |  |  |  |  |  |
| Mailing Address PO Box 970030  |  |                          | 05 1                                | 3 / 2008                               |  |  |  |  |  |  |
| City<br>St. Louis  | State Zip Code<br>MO 63197-0030                        |                          | Amount of Each                      | Disbursement this Period               |  |  |  |  |  |  |
| Purpose of Disbursement  |  |                          |                                     | 3.52                                   |  |  |  |  |  |  |
| Federal Unemployment Candidate Name  |  | 001<br>Category/<br>Type |                                     |  |  |  |  |  |  |  |
| Office Sought: House Disburs Senate President State: District:                 | ement For:  Primary  General  Other (specify)          | .,,,,,                   |                                     |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |  |                          |                                     |  |  |  |  |  |  |  |
| Financial Agent Federal Tax Deposit  |  |                          | Transaction ID:<br>Date of Disburse | SB21B.26929<br>ement                   |  |  |  |  |  |  |
| Mailing Address PO Box 970030  |  |                          | 05 1                                | $\begin{bmatrix} 0 \\ 3 \end{bmatrix}$ |  |  |  |  |  |  |
| City<br>St. Louis  | State         Zip Code           MO         63197-0030 |                          | Amount of Each                      | Disbursement this Period               |  |  |  |  |  |  |
| Purpose of Disbursement<br>Medicare Company                                    |  | 001                      |                                     | 145.00                                 |  |  |  |  |  |  |
| Candidate Name   | C  | Category/<br>Type        |                                     |  |  |  |  |  |  |  |
| Office Sought: House Disburs Senate President State: District:                 | ement For: Primary General Other (specify)             |                          |                                     |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |  |                          | Transaction ID:                     | SB21B.26930                            |  |  |  |  |  |  |
| Financial Agent Federal Tax Deposit  |  |                          | Date of Disburse                    |  |  |  |  |  |  |  |
| Mailing Address PO Box 970030  |  |                          | 05 1                                | 3 7 2008                               |  |  |  |  |  |  |
| City<br>St. Louis  | State Zip Code MO 63197-0030                           |                          | Amount of Each                      | Disbursement this Period               |  |  |  |  |  |  |
| Purpose of Disbursement  | Г  |                          |                                     | 145.00                                 |  |  |  |  |  |  |
| Medicare Employee Candidate Name   |  | 001<br>Category/<br>Type |                                     |  |  |  |  |  |  |  |
| Senate President   | ement For: Primary General Other (specify)             | . 7,50                   |                                     |  |  |  |  |  |  |  |
| State: District:   |  |                          |                                     |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)                                 |  | <b>)</b>                 |                                     | 293.52                                 |  |  |  |  |  |  |

| or for o  | commercial purpo  | from such Reports<br>ses, other than usin         |             |                                    |                        | - 1 |              |          |                  | $\rightarrow$ |                | 24              | ш    | 25           | $\bigsqcup^2$  |
|-----------|---|---|-------------|------------------------------------|------------------------|-----|--------------|----------|------------------|---------------|----------------|-----------------|------|--------------|----------------|
| Fu        |   | TTEE (In Eull)                                    | ng the name |                                    |                        |     |              |          |                  | irpos         |                |                 |      |              | 3<br>s         |
|           |   | ATIONAL COM                                       | MITTEE      |                                    |                        |     |              |          |                  |               |                |                 |      |              |                |
| _         | ull Name (Last, Fir<br>inancial Agent I<br>ailing Address | st, Middle Initial) Federal Tax Dep PO Box 970030 |             |                                    |                        |     |              |          | Date             |               | sburs          | SB21 ement      |      | 931<br>0 ố t | 3 <sup>Y</sup> |
| Cit       |   |   | S           | State<br>MO                        | Zip Code<br>63197-0030 |     |              |          | Amou             | ınt of        |                | Disburse        |      |              |                |
| Pu<br>Me  | urpose of Disburse<br>ledicare Company<br>andidate Name   |   | ľ           | wio                                | 63197-0030             |     | 001<br>atego | ory/     |                  |               |                |                 | 1    | 96.6         | 3              |
|           | ffice Sought:   | House Senate President                            |             | nent For:<br>Primary<br>Other (spe | General                |     | Туре         | 9        |                  |               |                |                 |      |              |                |
| Fu        | ull Name (Last, Fir                                       |   | osit        |                                    |                        |     |              |          | Date             | of Di         | sburs          | : SB21<br>ement |      |              | V              |
| Ma        | ailing Address  | PO Box 970030                                     | )           |                                    |                        |     |              |          | o <sup>M</sup> 5 | M /           | <sup>D</sup> 1 | 3 /             | ž    | o ŏ s        | 3              |
| Cit<br>St | ity<br>t. Louis   |   |             | State<br>MO                        | Zip Code<br>63197-0030 |     |              |          | Amou             | ınt of        | Each           | Disburse        | emen | t this       | Period         |
| Me        | urpose of Disburse<br>ledicare Employee<br>andidate Name  |   |             |                                    |                        |     | 001<br>atego | ory/     |                  |               |                | · · · · ·       | . 1  | 96.6         | 3              |
|           | ffice Sought:   | House Senate President District:                  |             | nent For:<br>Primary<br>Other (spe | General Cify) ▼        |     | - 7 -        |          |                  |               |                |                 |      |              |                |
|           | ull Name (Last, Fir<br>inancial Agent I                   | st, Middle Initial)<br>Federal Tax Dep            | osit        |                                    |                        |     |              |          | Date             | of Di         | sburs          | : SB21<br>ement |      |              |                |
| Ma        | ailing Address  | PO Box 970030                                     | )           |                                    |                        |     |              |          | 0 5              | M /           | <sup>D</sup> 1 | 3 /             | ž    | 0 0 8        | 3 <sup>*</sup> |
| Cit<br>St | ity<br>t. Louis   |   |             | State<br>MO                        | Zip Code<br>63197-0030 |     |              |          | Amou             | ınt of        | Each           | Disburse        | emen | t this       | Period         |
| Sc        | urpose of Disburse<br>ocial Security Com<br>andidate Name |   |             |                                    |                        |     | 001<br>atego | ory/     |                  |               | •              |                 | . 6  | 320.0        | 0              |
|           | ffice Sought:   | House<br>Senate<br>President                      |             | nent For:<br>Primary<br>Other (spe | General cify) ▼        |     | . ypc        |          |                  |               |                |                 |      |              |                |
|           |   | District:<br>sements This Page                    | (ontional)  |                                    |                        |     |              | <b>•</b> |                  | -             | •              | •               | 10   | 13.2         | 6              |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE (check only     |  |
|---|--|--------------------------|--|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | X 21b 27                 | 22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Stater or for commercial purposes, other than using the name |  |                          |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                          |  |
| Full Name (Last, First, Middle Initial)   |  |                          | IF ODDAD 00004   |
| Financial Agent Federal Tax Deposit   |  |                          | Transaction ID: SB21B.26934  Date of Disbursement  |
| Mailing Address PO Box 970030   |  |                          | $ \begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} D & 1 & 3 \\ 0 & 1 & 3 \end{bmatrix} / \begin{bmatrix} Y & 2 & 0 & 0 & 8 \\ 2 & 0 & 0 & 8 \end{bmatrix} $   |
| City<br>St. Louis   | State         Zip Code           MO         63197-0030 |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |  | 004                      | 620.00   |
| Social Security Employee Candidate Name   |  | 001<br>Category/<br>Type |  |
| Senate President  | ement For: Primary General Other (specify)             |                          |  |
| State: District: Full Name (Last, First, Middle Initial)  |  |                          | Turne and an ID COOKE  |
| Financial Agent Federal Tax Deposit   |  |                          | Transaction ID: SB21B.26935 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Mailing Address PO Box 970030   |  |                          | 05   |
| City<br>St. Louis   | State Zip Code MO 63197-0030                           |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Social Security Company  |  | 001                      | 840.79   |
| Candidate Name  |  | Category/<br>Type        |  |
| Senate President  | ement For: Primary General Other (specify)             |                          |  |
| State: District:  |  |                          |  |
| Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit                               |  |                          | Transaction ID: SB21B.26936 Date of Disbursement   |
| Mailing Address PO Box 970030   |  |                          | $\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$ |
| City<br>St. Louis   | State Zip Code<br>MO 63197-0030                        |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Social Security Employee   |  | 001                      | 840.79   |
| Candidate Name  |  | Category/<br>Type        |  |
| Senate President  | ement For: Primary General Other (specify)             |                          |  |
| State: District:  |  |                          |  |
| SUBTOTAL of Disbursements This Page (optional)  |  |                          | 2301.58  |

В.

C.

# **SCHEDULE B (FEC Form 3X)** ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 139 / 183 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26937 Financial Agent Federal Tax Deposit Date of Disbursement 13 0 5 2008 Mailing Address PO Box 970030 City State Zip Code Amount of Each Disbursement this Period St. Louis MO 63197-0030 1096.00 Purpose of Disbursement Federal Withholding 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26938 Financial Agent Federal Tax Deposit Date of Disbursement 13 0 5 2008 Mailing Address PO Box 970030 City State Zip Code Amount of Each Disbursement this Period 63197-0030 St. Louis MO 1534.00 Purpose of Disbursement Federal Withholding 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26939 Financial Agent Federal Tax Deposit Date of Disbursement 2008 Mailing Address PO Box 970030 City State Zip Code Amount of Each Disbursement this Period St. Louis MO 63197-0030 5.38 Purpose of Disbursement Federal Unemployment 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 2635.38 SUBTOTAL of Disbursements This Page (optional) ....  $\blacktriangleright$ 

TOTAL This Period (last page this line number only) ......

C.

| SCHEDULE B (FEC Form 3X)   |                                    | arate schedule(s)               |    |             | OR LIN     |                   |                  | R:   |           |     | РА        | GE   | 140 /    | 183   |           |
|--|------------------------------------|---------------------------------|----|-------------|------------|-------------------|------------------|------|-----------|-----|-----------|------|----------|-------|-----------|
| ITEMIZED DISBURSEMENTS   |                                    | category of the<br>Summary Page |    | X           |            | $\prod_{i=1}^{n}$ | 22<br>28a        |      | 23<br>28b |     | 24<br>28c | П    | 25<br>29 | П     | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full) |                                    |                                 |    |             |            |                   |                  |      |           |     |           |      |          | 5     |           |
| LIBERTARIAN NATIONAL COMMITTEE   |                                    |                                 |    |             |            |                   |                  |      |           |     |           |      |          |       |           |
| Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit  |                                    |                                 |    |             |            |                   |                  |      | isburse   | eme | _         |      |          | Y     |           |
| Mailing Address PO Box 970030  |                                    |                                 |    |             |            |                   | 0 <sup>M</sup> 5 |      | 2         | 2 7 |           | 2    | ο ὁ ε    | 3     |           |
| •  | State<br>MO                        | Zip Code<br>63197-0030          |    |             |            |                   | Amou             | nt o | f Each    | Dis | sburse    | -    | -        | -     | d         |
| Purpose of Disbursement<br>Medicare Company  |                                    |                                 |    | 00          | 1          |                   | <u></u>          |      |           |     |           | 2    | 203.3    | 7     |           |
| Candidate Name   |                                    |                                 |    | ateç<br>Typ | gory/<br>e |                   |                  |      |           |     |           |      |          |       |           |
| Senate President   | ment For:<br>Primary<br>Other (spe | General ecify) ▼                |    |             |            |                   |                  |      |           |     |           |      |          |       |           |
| State: District: Full Name (Last, First, Middle Initial)   |                                    |                                 |    |             |            |                   | Trans            | acti | on ID:    |     | SB21F     | 3 26 | 941      |       |           |
| Financial Agent Federal Tax Deposit  |                                    |                                 |    |             |            |                   | Date o           |      | isburs    | eme |           |      | •        | Y     |           |
| Mailing Address PO Box 970030  |                                    |                                 |    |             |            |                   | 0 5              |      | 2         | 2 7 | ľ         | , 2  | 0 0 8    | 3     |           |
| •  | State<br>MO                        | Zip Code<br>63197-0030          |    |             |            |                   | Amou             | nt o | f Each    | Dis | sburse    | men  | t this F | Perio | t         |
| Purpose of Disbursement<br>Medicare Employee   |                                    |                                 |    | 00          | 1          |                   |                  |      |           |     |           | 2    | 203.3    | 7     |           |
| Candidate Name   |                                    |                                 | Ca | -           | gory/      |                   |                  |      |           |     |           |      |          |       |           |
| Senate President   | ment For:<br>Primary<br>Other (spe | General <b>▼</b>                |    |             |            |                   |                  |      |           |     |           |      |          |       |           |
| Full Name (Last, First, Middle Initial)  |                                    |                                 |    |             |            | +                 | Trans            | acti | on ID:    | : 5 | SB21E     | 3.26 | 942      |       |           |
| Financial Agent Federal Tax Deposit  |                                    |                                 |    |             |            |                   | Date o           |      | isburs    | eme |           |      |          | Υ     |           |
| Mailing Address PO Box 970030  |                                    |                                 |    |             |            |                   | 0 5              |      | ້ 2       | 2 7 | ľ         | 2    | 0 0 8    | 3     |           |
|  | State<br>MO                        | Zip Code<br>63197-0030          |    |             |            |                   | Amou             | nt o | f Each    | Dis | sburse    | men  | t this F | Perio | b         |
| Purpose of Disbursement<br>Social Security Company   |                                    |                                 |    | 00          | 2          |                   |                  | _    |           |     |           | 8    | 869.5    | 7     |           |
| Candidate Name   |                                    |                                 | Са |             | jory/      |                   |                  |      |           |     |           |      |          |       |           |
| Office Sought: House Disburse Senate President   | ment For:<br>Primary<br>Other (spe | General                         |    | 7.          | -          |                   |                  |      |           |     |           |      |          |       |           |
| State: District:   |                                    | <b>-</b>                        |    |             |            |                   |                  |      |           |     |           |      |          |       |           |
| SUBTOTAL of Disbursements This Page (optional) .   |                                    |                                 |    |             | •          |                   |                  |      |           |     |           | 12   | 76.3     | 1     |           |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                  | FOR LINE          |   | PAGE 141 / 183        |
|---|---|-------------------|---|-----------------------|
| ITEMIZED DISBURSEMENTS  | for each category of the                  | (check only       | one)<br>] 22  | 24 25 26              |
|   | Detailed Summary Page                     | 27                | 28a 28b   | 28c 29 30b            |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |   |                       |
| NAME OF COMMITTEE (In Full)   |   |                   |   |                       |
| / LIBERTARIAN NATIONAL COMMITTEE  |   |                   |   |                       |
| Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit                               |   |                   | Transaction ID: S Date of Disbursemer   |                       |
|   |   |                   | 0 5 DISSUISCINE   | , Y Y Y O Y 8 Y       |
| Mailing Address PO Box 970030   |   |                   | 0 0 2 7   | 2000                  |
| •   | State Zip Code<br>MO 63197-0030           |                   | Amount of Each Disk   | oursement this Period |
| Purpose of Disbursement   |   |                   |   | 869.57                |
| Social Security Employee Candidate Name   |   | 001<br>Category/  |   |                       |
|   | _   | Туре              |   |                       |
| Office Sought: House Disburse Senate  | ment For:    Primary   General            |                   |   |                       |
| President   | Other (specify)                           |                   |   |                       |
| State: District: Full Name (Last, First, Middle Initial)  |   |                   |   |                       |
| Financial Agent Federal Tax Deposit   |   |                   | Transaction ID: Since Date of Disbursement  |                       |
| Mailing Address PO Box 970030   |   |                   | $\begin{bmatrix} 0^{M} 5^{M} \end{bmatrix} / \begin{bmatrix} 0 & 2 & 7 \end{bmatrix}$ | Y 2008                |
| City  | State Zip Code                            |                   | Amount of Each Disk   | oursement this Period |
| St. Louis   | MO 63197-0030                             |                   | Amount of Edon Blok   |                       |
| Purpose of Disbursement<br>Federal Withholding  |   | 001               |   | 1105.00               |
| Candidate Name  |   | Category/<br>Type |   |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) |                   |   |                       |
| State: District:  | Other (specify)                           |                   |   |                       |
| Full Name (Last, First, Middle Initial)   |   |                   | Transaction ID: S   |                       |
| Financial Agent Federal Tax Deposit   |   |                   | Date of Disbursemer   |                       |
| Mailing Address PO Box 970030   |   |                   | 05 28   | 2008                  |
|   | State Zip Code MO 63197-0030              |                   | Amount of Each Disk   | oursement this Period |
| Purpose of Disbursement   |   |                   |   | 4.40                  |
| Federal Unemployment Candidate Name   |   | 001<br>Category/  |   |                       |
|   |   | Type              |   |                       |
| Office Sought: House Disburse Senate  | ment For:  Primary General                |                   |   |                       |
| President   | Other (specify)                           |                   |   |                       |
| State: District:  |   |                   |   |                       |
| SUBTOTAL of Disbursements This Page (optional)  |   |                   |   | 1978.97               |

C.

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE                 | NII IMPED:                             | PAGE 142 / 183                 |
|---|---|--------------------------|--|--------------------------------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only              |  | FAGL 142/103                   |
|   | Detailed Summary Page                             | X 21b 27                 | 22 23 28b 28b                          | 24 25 26<br>28c 29 30b         |
| Any Information copied from such Reports and Statem                         |   | by any person f          | or the purpose of solic                | iting contributions            |
| or for commercial purposes, other than using the name                       | and address of any political of                   | committee to sol         | licit contributions from               | such committee                 |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE                  |   |                          |  |                                |
| / Full Name (Last, First, Middle Initial)                                   |   |                          | Tuesday ID: (                          | 2D04D 00040                    |
| Financial Agent Federal Tax Deposit   |   |                          | Transaction ID: S Date of Disbursement |                                |
| Mailing Address PO Box 970030   |   |                          | 05 / 28                                | 2008                           |
| ,   | State Zip Code<br>MO 63197-0030                   |                          | Amount of Each Dis                     | sbursement this Period         |
| Purpose of Disbursement   |   | 201                      |  | 211.83                         |
| Medicare Company Candidate Name   |   | 001<br>Category/<br>Type |  |                                |
| Senate President  | ment For: Primary General Other (specify)         | 71                       |  |                                |
| State: District:  |   |                          |  |                                |
| Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit |   |                          | Transaction ID: S Date of Disburseme   | ent                            |
| Mailing Address PO Box 970030   |   |                          | 05 / 28                                | Y 2008                         |
| ,   | State Zip Code MO 63197-0030                      |                          | Amount of Each Dis                     | sbursement this Period         |
| Purpose of Disbursement   | 00107 0000  |                          |  | 211.83                         |
| Medicare Employee  Candidate Name   |   | 001<br>Category/         |  |                                |
| Candidate Name  |   | Type                     |  |                                |
| Senate President  | ment For: Primary General Other (specify)         |                          |  |                                |
| State: District:  |   |                          |  |                                |
| Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit |   |                          | Transaction ID: S Date of Disbursement | ent                            |
| Mailing Address PO Box 970030   |   |                          | 05 / 28                                | <sup>'</sup> 2008 <sup>'</sup> |
|   | State Zip Code MO 63197-0030                      |                          | Amount of Each Dis                     | sbursement this Period         |
| Purpose of Disbursement<br>Social Security Company                          |   | 001                      |  | 905.75                         |
| Candidate Name  |   | Category/<br>Type        |  |                                |
| Office Sought: House Disburse Senate President                              | ment For: Primary General Other (specify)         | . , , , ,                |  |                                |
| State: District:  | ¥   |                          |  |                                |
| SUBTOTAL of Disbursements This Page (optional) .                            |   | <b>&gt;</b>              |  | 1329.41                        |

В.

C.

# **SCHEDULE B (FEC Form 3X)** ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 143 / 183 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26949 Financial Agent Federal Tax Deposit Date of Disbursement 28 0 5 2008 Mailing Address PO Box 970030 City State Zip Code Amount of Each Disbursement this Period St. Louis MO 63197-0030 905.75 Purpose of Disbursement Social Security Employee 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26950 Financial Agent Federal Tax Deposit Date of Disbursement 0 5 28 2008 Mailing Address PO Box 970030 City State Zip Code Amount of Each Disbursement this Period 63197-0030 St. Louis MO 2279.00 Purpose of Disbursement Federal Withholding 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.26825 Cheryl Forde Date of Disbursement 06 0 5 2008 Mailing Address PO Box 56507 City State Zip Code Amount of Each Disbursement this Period Philadelphia PA 19111-6507 1491.00 Purpose of Disbursement Petitioning Expense 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 4675.75 SUBTOTAL of Disbursements This Page (optional) ...  $\blacktriangleright$ 

TOTAL This Period (last page this line number only) .....

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|           |                                       | B (FEC Form 3) SBURSEMENT                           | ·         |                                    | arate schedule(s) category of the |   |             | R LIN        |         |                | R:   |           |     | F       | AGE    | 144      | / 18           | 3          |
|-----------|---------------------------------------|---|-----------|------------------------------------|-----------------------------------|---|-------------|--------------|---------|----------------|------|-----------|-----|---------|--------|----------|----------------|------------|
| ••        |                                       | obonoemen.  |           |                                    | Summary Page                      |   | Х           | 21b<br>27    |         | 2<br>8a        | Н    | 23<br>28b | ŀ   | 24      | ,      | 25<br>29 |                | 26<br>  30 |
|           |                                       | ed from such Reports ar<br>rposes, other than using |           |                                    |                                   |   |             | persor       | for the | e pu           |      | e of      |     | citing  | contri | bution   |                | 10.        |
| $\rangle$ | NAME OF COMI<br>LIBERTARIAN           | MITTEE (In Full)<br>I NATIONAL COMMI                | ITTEE     |                                    |                                   |   |             |              |         |                |      |           |     |         |        |          |                |            |
|           | Full Name (Last,<br>Cheryl Forde      | First, Middle Initial)                              |           |                                    |                                   |   |             |              | D       | ate d          | of D | sburs     | sen |         |        |          | V              |            |
|           | Mailing Address                       | PO Box 56507  |           |                                    |                                   |   |             |              |         | <sup>M</sup> 5 |      | L         | 1 3 | 3 '     | 2      | o ŏ      | 8              |            |
|           | City<br>Philadelphia                  |   |           | State<br>PA                        | Zip Code<br>19111-6507            |   |             |              | Aı      | nou            | nt o | Eac       | h [ | isbur   | emer   | nt this  | Perio          | od         |
|           | Purpose of Disbu<br>Petitioning Exper |   |           |                                    |                                   | Г | 00          | 1            |         |                | -    | _         |     |         | 14     | 440.0    | 00             |            |
|           | Candidate Name                        |   |           |                                    |                                   | С | ateg<br>Typ | •            |         |                |      |           |     |         |        |          |                |            |
|           | Office Sought:                        | House<br>Senate<br>President                        |           | nent For:<br>Primary<br>Other (spe | General ecify) ▼                  |   | 71-         |              |         |                |      |           |     |         |        |          |                |            |
| —         | State:                                | District: First, Middle Initial)                    |           |                                    |                                   |   |             |              |         |                |      | 15        | _   | ODO     | 1 D 0  | 2007     |                |            |
|           | Cheryl Forde                          | r not, who are minding                              |           |                                    |                                   |   |             |              | D       | ate d          | of D | sbur      | sen | _       |        |          |                |            |
|           | Mailing Address                       | PO Box 56507  |           |                                    |                                   |   |             |              |         | 5              | М    | D         | 2 - | ) /<br> | Y 2    | o ŏ      | 8 <sup>Y</sup> |            |
|           | City<br>Philadelphia                  |   |           | State<br>PA                        | Zip Code<br>19111-6507            |   |             |              | Aı      | mou            | nt o | Eac       | h E | isbur   | semer  | nt this  | Perio          | od         |
|           | Purpose of Disbu                      |   |           |                                    |                                   | Г | 00          | 1            | 1 L     | _              | _    |           |     |         | 12     | 200.0    | 00             |            |
|           | Candidate Name                        |   |           |                                    |                                   | С | ateg<br>Typ | ory/         |         |                |      |           |     |         |        |          |                |            |
|           | Office Sought:                        | House<br>Senate<br>President                        | Disburser | nent For:<br>Primary<br>Other (spe | General ecify) ▼                  |   | - 71-       | -            |         |                |      |           |     |         |        |          |                |            |
| _         | State:                                | District:   |           |                                    |                                   |   |             |              |         |                |      |           |     |         |        |          |                |            |
|           | Full Name (Last,<br>Cheryl Forde      | First, Middle Initial)                              |           |                                    |                                   |   |             |              |         |                |      | sburs     | sen |         | 1B.26  | 6828     |                |            |
|           | Mailing Address                       | PO Box 56507  |           |                                    |                                   |   |             |              |         | 5              | М    | D         | 2 9 | ) /     | Y 2    | δοŏ      | 8              |            |
|           | City<br>Philadelphia                  |   |           | State<br>PA                        | Zip Code<br>19111-6507            |   |             |              | Aı      | nou            | nt o | Eac       | hΕ  | isbur   | emer   | nt this  | Perio          | od         |
|           | Purpose of Disbu                      |   |           |                                    |                                   |   | v           | -            | 1 L     |                | _    |           |     |         | 10     | 034.0    | 00             |            |
|           | Petitioning Exper                     | se  |           |                                    |                                   | C | 00<br>ateg  | ory/         |         |                |      |           |     |         |        |          |                |            |
|           | Office Sought:                        | House<br>Senate<br>President                        |           | ment For:<br>Primary<br>Other (spe | General                           |   | Тур         | <del>U</del> |         |                |      |           |     |         |        |          |                |            |
|           | State:                                | District:   |           | ( <b>op</b> (                      | J/ ▼                              |   |             |              |         |                |      |           |     |         |        |          |                |            |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE          |                                       | PAGE 145 / 183        |
|---|--|-------------------|---------------------------------------|-----------------------|
| ITEMIZED DISBURSEMENTS  | (check only  | one)              | 24 25 26                              |                       |
|   | Detailed Summary Page                                  | 27                | 28a 28b                               | 28c 29 30b            |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                   |                                       |                       |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                   |                                       |                       |
| /   |  |                   |                                       |                       |
| Full Name (Last, First, Middle Initial) FP Mailing Solutions  |  |                   | Transaction ID: S Date of Disbursemen | nt                    |
| Mailing Address Dept 4272   |  |                   | 05 / 31                               | 2008                  |
| •   | State         Zip Code           IL         60122-4272 |                   | Amount of Each Disk                   | bursement this Period |
| Purpose of Disbursement Postage & Meter Resets  | [  | 003               |                                       | 1000.00               |
| Candidate Name  | -  | Category/<br>Type |                                       |                       |
| Office Sought: House Disburse Senate President  |  |                   |                                       |                       |
| State: District:  |  |                   |                                       |                       |
| Full Name (Last, First, Middle Initial) Freedom Petition Management, Inc.                                 |  |                   | Transaction ID: S Date of Disbursemen | nt                    |
| Mailing Address 25 Cobblestone Ln.  |  |                   | 05 15                                 | 2008                  |
| •   | State         Zip Code           MA         01606-0000 |                   | Amount of Each Disl                   | bursement this Period |
| Purpose of Disbursement Petitioning Expense   |  | 001               |                                       | 493.48                |
| Candidate Name  | L  | Category/<br>Type |                                       |                       |
| Senate President  | ement For: Primary General Other (specify)             |                   |                                       |                       |
| State: District:  |  |                   |                                       |                       |
| Full Name (Last, First, Middle Initial) Freedom Petition Management, Inc.                                 |  |                   | Transaction ID: S Date of Disbursemen | nt                    |
| Mailing Address 25 Cobblestone Ln.  |  |                   | 05 15                                 | 2008                  |
|   | State Zip Code MA 01606-0000                           |                   | Amount of Each Disk                   | bursement this Period |
| Purpose of Disbursement Petitioning Expense   |  | 001               |                                       | 4000.00               |
| Candidate Name  |  | Category/<br>Type |                                       |                       |
| Office Sought: House Disburse Senate President  | ement For: Primary General Other (specify)             | Ni                |                                       |                       |
| State: District:  |  |                   |                                       |                       |
| SUBTOTAL of Disbursements This Page (optional)  |  |                   |                                       | 5493.48               |

|        | CHEDULE B (FEC Form 3X)   |                                     | rate schedule(s)                        |             |           | LINE NUMBER: PAGE 14 k only one) |                  |           |       |           |      | 146 /    | 183    |
|--------|---|-------------------------------------|---|-------------|-----------|----------------------------------|------------------|-----------|-------|-----------|------|----------|--------|
|        | EMIZED DISBURSEMENTS  | Detailed S                          | ategory of the Summary Page             | X           | 21b<br>27 | 22<br>28a                        |                  | 23<br>28b |       | 24<br>28c |      | 25<br>29 | 26     |
|        | ny Information copied from such Reports and Statem for commercial purposes, other than using the name |                                     |   |             |           |                                  |                  |           |       |           |      |          | 3      |
|        | NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |                                     | , | <br>        |           |                                  |                  |           |       |           |      |          |        |
| ۷.     | Full Name (Last, First, Middle Initial) Frye & Wolcott, CPAs  |                                     |   |             |           |                                  |                  | ion ID    |       | SB21E     | 3.26 | 955      |        |
|        | Mailing Address Attn: Mark R Frye, CPA 9161 Liberia Avenue, Sui                                       | te 304                              |   |             |           | 0 <sup>M</sup> 5                 | М                | / D       | 1 5   | / Y       | Ž    | 0 0 8    | 3 Y    |
|        | City  | State<br>VA                         | Zip Code<br>20110-0000                  |             |           | Amou                             | ınt c            | f Each    | n Di  | isburse   | -    |          |        |
|        | Purpose of Disbursement<br>Audit Expense  |                                     |   | 00-         | -         | <u> </u>                         |                  | •         |       |           | 83   | 300.00   | )      |
|        | Candidate Name  |                                     |   | ateg<br>Typ | •         |                                  |                  |           |       |           |      |          |        |
|        | Office Sought: House Disburse Senate President  | General cify) ▼                     |   |             |           |                                  |                  |           |       |           |      |          |        |
| _      | State: District:  |                                     |   |             |           |                                  |                  |           |       |           |      |          |        |
| 3.     | Full Name (Last, First, Middle Initial) Frye & Wolcott, CPAs  |                                     |   |             | Date      |                                  | ion ID<br>isburs |           |       |           |      | V        |        |
|        | Mailing Address Attn: Mark R Frye, CPA 9161 Liberia Avenue, Sui                                       | te 304                              |   |             |           | 0 5                              |                  | 3         | 3 0   |           |      | οδε      |        |
|        | Manassas  | State<br>VA                         | Zip Code<br>20110-0000                  |             |           | Amou                             | unt c            | f Each    | n Di  | isburse   | 0    | t this F |        |
|        | Purpose of Disbursement<br>Audit Expense  |                                     |   | 00          |           | L.                               |                  | •         | 0     |           | 20   | 00.00    | J      |
|        | Candidate Name  |                                     |   | ateg<br>Typ |           |                                  |                  |           |       |           |      |          |        |
|        | Senate President  | ment For:<br>Primary<br>Other (spec | General cify) ▼                         |             |           |                                  |                  |           |       |           |      |          |        |
| <br>). | State: District:  Full Name (Last, First, Middle Initial)  Great American Leasing                     |                                     |   |             |           |                                  | ion ID           |           | SB21E | 3.26      | 957  |          |        |
|        | Mailing Address 8742 INNOVATION WAY   | ′                                   |   |             |           | 0 <sup>M</sup> 5                 | М                | / D 3     | 3 0   | / Y       | Ž    | 0 0 8    | 3 Y    |
|        | ,   | State<br>IL                         | Zip Code<br>60682-0087                  |             |           | Amou                             | ınt c            | f Each    | n Di  | isburse   | men  | t this F | Period |
|        | Purpose of Disbursement<br>Post Meter Lease   |                                     |   | 00          | 1         |                                  |                  | -         |       |           | . 1  | 164.7    | 1      |
|        | Candidate Name  |                                     |   | ateg<br>Typ |           |                                  |                  |           |       |           |      |          |        |
|        | Office Sought: House Disburse Senate President  | General cify) ▼                     |   |             |           |                                  |                  |           |       |           |      |          |        |
| Г      | State: District:  |                                     |   |             |           | _                                |                  | _         |       | _         |      |          |        |
| 5      | SUBTOTAL of Disbursements This Page (optional) .  |                                     | <br>                                    |             | L.        |                                  |                  | 0         |       | 109       | 64.7 | 1        |        |
| 1      | <b>TOTAL</b> This Period (last page this line number only)  |                                     |   | <br>        | •         |                                  |                  |           |       |           |      |          |        |

C.

| SCHEDULE B (FEC Form 3X)   | Use separate schedule                          |         |      | OR LIN              |                       |                  | R:      |                | P             | AGE  | 147             | / 183     |
|--|--|---------|------|---------------------|-----------------------|------------------|---------|----------------|---------------|------|-----------------|-----------|
| TEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page |         | I —  | 21b<br>27           | $\mathbb{H}$          | 22<br>28a        |         | 23<br>28b      | 24<br>28c     | F    | 25<br>29        | 26<br>30b |
| Any Information copied from such Reports and Statemor for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)  |  |         |      |                     |                       |                  |         |                |               |      |                 | 5         |
| LIBERTARIAN NATIONAL COMMITTEE   |  |         |      |                     |                       |                  |         |                |               |      |                 |           |
| Full Name (Last, First, Middle Initial)  Sean N Haugh  Mailing Address 1821 Hillandale Road #1B-322  City Durham  Purpose of Disbursement Employee Net Pay Candidate Name  Office Sought: House Disburse |  | Date of | of D | isburse             | SB21 ement D Disburse | Y 2              | Ó 0 Ó 8 | Period         |               |      |                 |           |
| Senate President State: District:  | Primary Gener<br>Other (specify) ▼             | ral     |      |                     |                       |                  |         |                |               |      |                 |           |
| Full Name (Last, First, Middle Initial) Sean N Haugh  Mailing Address 1821 Hillandale Road #1B-322   |  |         |      |                     |                       | Date o           |         | isburse        | SB21<br>ement |      | 6830<br>Ž 0 Ŏ 8 | 3 Y       |
| •  | State Zip Code<br>NC 27705-00                  | 000     |      |                     |                       | Amou             | nt o    | f Each         | Disburse      | emer | nt this I       | Period    |
| Purpose of Disbursement Employee Net Pay Candidate Name  Office Sought: House Disburse   | ment For:                                      | C       | Cate | 01<br>egory/<br>ype |                       | L.               |         | •              |               | 1.   | 195.2           | 2         |
| Senate President State: District:  | Primary Gener<br>Other (specify) ▼             | ral     |      |                     |                       |                  |         |                |               |      |                 |           |
| Full Name (Last, First, Middle Initial)<br>Sean N Haugh  |  |         |      |                     |                       | Date of          | of D    | isburse        |               | B.26 | 5831            |           |
| Mailing Address 1821 Hillandale Road #1B-322   |  |         |      |                     |                       | o <sup>M</sup> 5 | М       | <sup>/</sup> 2 | 9 /           | Ž    | ó o è           | 3 Y       |
| City<br>Durham   | State Zip Code<br>NC 27705-00                  | 000     |      |                     |                       | Amou             | nt o    | f Each         | Disburse      | -    | nt this I       |           |
| Purpose of Disbursement Employee Net Pay Candidate Name  Office Sought: House Disburse   | ment For:                                      | C       | ate  | 01<br>egory/<br>ype |                       |                  |         |                |               | 1    | 300.0           |           |
| Senate President State: District:  | Primary Gener<br>Other (specify) ▼             | ral     |      |                     |                       |                  |         |                |               |      |                 |           |
| SUBTOTAL of Disbursements This Page (optional)   |  | <u></u> |      | . <b>•</b>          |                       |                  |         |                |               | 33   | 90.4            | 3         |

|           |   | (FEC Form                                    |        | Use sepa                          | rate schedule(s)             | FOR LIN           |                        | R:     |                |                | PAGE  | 148       | / 183          |
|-----------|---|--|--------|-----------------------------------|------------------------------|-------------------|------------------------|--------|----------------|----------------|-------|-----------|----------------|
| IT        | EMIZED DIS  | BURSEMEN                                     | ITS    |                                   | category of the Summary Page | (check of 21b) 27 | 1e)<br>22<br>28a       | _      | 23<br>28b      | 24<br>28       |       | 25<br>29  | П              |
|           |   | d from such Reports<br>poses, other than usi |        |                                   |                              |                   |                        |        |                |                |       |           | 5              |
| $\rangle$ | NAME OF COMM  |  |        |                                   | ,,                           |                   |                        |        |                |                |       |           |                |
|           | •   | First, Middle Initial) I P. & Associates     |        |                                   |                              |                   | <b>Frans</b><br>Date o |        |                | SB2<br>ment    | 1B.26 | 6833      |                |
|           | Mailing Address   | 9522 Nassingto                               | on Ct. |                                   |                              |                   | 0 <sup>M</sup> 5       | M /    | <sup>D</sup> 3 | 0 /            | Y     | ž o ŏ 8   | 3 Y            |
|           | City<br>Richmond  |  |        | ate<br>A                          | Zip Code<br>23229-6057       |                   | Amou                   | nt of  | Each           | Disbur         |       | nt this I |                |
|           | Purpose of Disbur<br>Writing for Non Ca<br>Candidate Name |  |        |                                   |                              | 001<br>ategory/   | <u> </u>               | •      |                | •              | 20    | 0.00      | 0              |
|           | Office Sought:  | House Senate President District:             | 1      | ent For:<br>Primary<br>Other (spe | General                      | Гуре              |                        |        |                |                |       |           |                |
|           | Full Name (Last, F<br>Joe Ragan's                         | First, Middle Initial)                       | •      |                                   |                              |                   | Date o                 | of Dis | burse          |                | 1B.27 | 7055      |                |
|           | Mailing Address   | PO Box 125                                   |        |                                   |                              |                   | o <sup>M</sup> 5       | M /    | <sup>D</sup> 1 | 5 <sup>/</sup> | Y     | 8 Ó 0 Š   | 3 Y            |
|           | City<br>Soringfield                                       |  |        | ate<br>A                          | Zip Code<br>22150-0125       |                   | Amou                   | nt of  | Each           | Disbur         | semer | nt this f | Perio          |
|           | Purpose of Disbur<br>Office Supplies<br>Candidate Name    | rsement                                      |        |                                   |                              | 001               | <u> </u>               |        |                | •              | 2     | 293.6     | 3              |
|           |   |  |        |                                   |                              | ategory/<br>Type  |                        |        |                |                |       |           |                |
|           | Office Sought: State:                                     | House Senate President District:             | 1 -    | ent For:<br>Primary<br>Other (spe | General cify) ▼              |                   |                        |        |                |                |       |           |                |
|           | Full Name (Last, F<br>Joe Ragan's                         | First, Middle Initial)                       |        |                                   |                              |                   | Date o                 | of Dis | burse          |                |       |           |                |
|           | Mailing Address   | PO Box 125                                   |        |                                   |                              |                   | 0 <sup>M</sup> 5       | М /    | <sup>D</sup> 3 | o ′            | Y 2   | ž 0 Ď 8   | 3 <sup>*</sup> |
|           | City<br>Soringfield                                       |  |        | ate<br>A                          | Zip Code<br>22150-0125       |                   | Amou                   | nt of  | Each           | Disbur         |       | nt this F |                |
|           | Purpose of Disbur<br>Office Supplies                      | rsement                                      |        |                                   |                              | 001               | <u></u>                |        |                |                | į.    | 586.9     | 4              |
|           | Candidate Name  |  |        |                                   |                              | ategory/<br>Type  |                        |        |                |                |       |           |                |
|           | Office Sought:  | House Senate President                       |        | ent For:<br>Primary<br>Other (spe | General cify) ▼              |                   |                        |        |                |                |       |           |                |
|           | State:  | District:                                    |        |                                   |                              |                   |                        |        |                |                |       |           |                |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule                            | e(s) |                         | IE NUMBER:       |                  | PAGE    | 149           | / 183          |
|---|--|------|-------------------------|------------------|------------------|---------|---------------|----------------|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Pag |      | (check of 21b 27        | 22<br>28a        | 23 24<br>28b 28  |         | 25<br>29      | 26<br>30b      |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |      | any persor              | n for the purpos | se of soliciting | contril | outions       |                |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |      |                         |                  |                  |         |               |                |
| Full Name (Last, First, Middle Initial) Joe Ragan's  Mailing Address PO Box 125                           |  |      |                         |                  | isbursement      |         | 7056<br>0 0 8 | B <sup>Y</sup> |
|   | State Zip Code<br>VA 22150-01                    | 25   |                         | Amount o         | f Each Disbu     |         | -             |                |
| Purpose of Disbursement Office Supplies Candidate Name  |  | C    | 001<br>ategory/<br>Type | L                |                  | 2       | 207.6         | 9              |
| Office Sought: House Disburse Senate President State: District:   | ement For: Primary Gener Other (specify)         | al   |                         |                  |                  |         |               |                |
| Full Name (Last, First, Middle Initial) Scott A Kohlhaas  |  |      |                         | Date of D        | ion ID: SB2      |         | 834<br>0 0 8  | Y              |
| Mailing Address 6701 East 6th Ave Apt 24  |  |      |                         | 0 5              | 0 1              | 2       | 008           | 3              |
| •   | State Zip Code<br>AK 99504-00                    | 00   |                         | Amount o         | f Each Disbu     |         |               |                |
| Purpose of Disbursement Petitioning Expense Candidate Name  |  | C    | 001<br>ategory/         | L                |                  | 40      | 00.00         | 0              |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ement For: Primary Gener Other (specify)         | al   | Туре                    |                  |                  |         |               |                |
| Full Name (Last, First, Middle Initial) Robert S Kraus  |  |      |                         | Date of D        | ion ID: SB2      |         |               |                |
| Mailing Address 5375 Duke Street Apt 905  |  |      |                         | 05               | 14               | Ý Ž     | 0 0 8         | 3 <sup>Y</sup> |
| Alexandria  | State Zip Code<br>VA 22304-00                    | 00   |                         | Amount o         | f Each Disbu     |         | t this f      |                |
| Purpose of Disbursement Employee Net Pay Candidate Name   |  | C    | 001<br>ategory/<br>Type |                  |                  | l C     | 93.3          | 2              |
| Senate President  | ement For:  Primary  Gener  Other (specify)      | al   |                         |                  |                  |         |               |                |
| State: District:  |  |      |                         |                  |                  | 56      | 03.2          | 4              |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .   |  |      | <u></u>                 |                  |                  |         | 30.2          |                |

C.

| COLLEGE E D. (EEO E OV)   |  |                      |  |
|---|--|----------------------|--|
| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE (check only |  |
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page | X 21b 27             | 22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                      |  |
| NAME OF COMMITTEE (In Full)   | y and address of any pointed                   |                      |  |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                      |  |
| Full Name (Last, First, Middle Initial)   |  |                      | Transaction ID: SB21B.26836  |
| Robert S Kraus  |  |                      | Date of Disbursement   |
| Mailing Address 5375 Duke Street Apt 905  |  |                      | $\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} Y$             |
| City  | State Zip Code                                 |                      | Amount of Each Disbursement this Period  |
|   | VA 22304-0000                                  |                      | 1395.57  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                  | 1000.07  |
| Candidate Name  |  | Category/<br>Type    |  |
| Senate President  | ement For: Primary General Other (specify)     |                      |  |
| State: District:  |  |                      |  |
| Full Name (Last, First, Middle Initial) Robert S Kraus  |  |                      | Transaction ID: SB21B.26837 Date of Disbursement   |
| Mailing Address 5375 Duke Street Apt 905  |  |                      | $\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$ |
| ,   | State Zip Code<br>VA 22304-0000                |                      | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                  | 3000.00  |
| Candidate Name  |  | Category/<br>Type    |  |
| Senate President  | ement For: Primary General Other (specify)     |                      |  |
| State: District: Full Name (Last, First, Middle Initial)  |  |                      |  |
| Alexa R Lamoureux   |  |                      | Transaction ID: SB21B.26838 Date of Disbursement   |
| Mailing Address 1224 Powhaton St.   |  |                      | $\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} D & 1 & 0 \\ 0 & 1 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$   |
|   | State Zip Code<br>VA 22314-1306                |                      | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Employee Net Pay   |  | 001                  | 86.04  |
| Candidate Name  |  | Category/<br>Type    |  |
| Office Sought: House Disburse Senate President  | ement For: Primary General Other (specify)     | . 760                |  |
| State: District:  | • • •  |                      |  |
| SUBTOTAL of Disbursements This Page (optional) .  |  | <b>&gt;</b>          | 4481.61  |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       |    | FOR LIN                |           | BER:    |           | P               | AGE        | 151 /        | 183       |
|---|--|----|------------------------|-----------|---------|-----------|-----------------|------------|--------------|-----------|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page |    | (check of X) 21b 27    | 22        | Ę       | 23<br>28b | 24<br>28c       | П          | 25<br>29     | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |    | ny persor              | n for the | purpo   | ose of s  | oliciting c     |            | utions       |           |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |    |                        |           |         |           |                 |            |              |           |
| Full Name (Last, First, Middle Initial) Alexa R Lamoureux  Mailing Address 1224 Powhaton St.              |  |    |                        |           | e of [  | Disburs   |                 |            | 839<br>0 ŏ 8 | Y         |
|   | State Zip Code<br>VA 22314-1306                |    |                        | Am        | ount    | of Each   | Disburse        | ement      | this F       | Period    |
| Purpose of Disbursement Employee Net Pay Candidate Name   | 001<br>tegory/<br>Type                         |    |                        |           |         | , 5       | 20.32           | 2          |              |           |
| Office Sought:  Senate President State:  Disburse   |  |    |                        |           |         |           |                 |            |              |           |
| Full Name (Last, First, Middle Initial) Alexa R Lamoureux   |  |    |                        |           | e of [  | Disburs   | : SB21<br>ement |            | 840<br>0 ŏ 8 | Y         |
| Mailing Address 1224 Powhaton St.   | State Zip Code                                 |    |                        |           |         |           | Disburse        |            |              |           |
| Aléxandria  | VA 22314-1306                                  |    |                        |           | ount    | oi Lacii  | Disbuise        | -          | 00.00        | -         |
| Purpose of Disbursement Employee Net Pay Candidate Name   |  | Ca | 001<br>tegory/<br>Γype |           | •       | •         |                 |            | 00.00        | ,         |
| Senate President  | ment For: Primary General Other (specify)      |    | . , , , ,              |           |         |           |                 |            |              |           |
| State: District: Full Name (Last, First, Middle Initial)  |  |    |                        | Tra       | neac    | tion ID   | : SB21          | B 26       | 960          |           |
| MAMSI - UnitedHealth (WFG)  |  |    |                        |           | e of [  | Disburs   | ement           |            |              | V         |
| Mailing Address PO Box 42924  |  |    |                        | O         | 5 "     | 1         | 5 /             | <u>'</u> 2 | οŏε          | 3 '       |
| City<br>Philadelphia  |  |    | Am                     | ount      | of Each | Disburse  | ement           | this F     | Period       |           |
| Purpose of Disbursement Employee Medical Insurance  |  |    | 004                    | 7 L       |         |           |                 | , 6        | 71.00        | )         |
| Candidate Name  |  | Ca | 001<br>tegory/<br>Type |           |         |           |                 |            |              |           |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      |    | 71: -                  |           |         |           |                 |            |              |           |
| State: District:  | · · · · · · · · · · · · · · · · · · ·          |    |                        |           |         |           |                 |            |              |           |
| SUBTOTAL of Disbursements This Page (optional) .  |  |    | <b>&gt;</b>            |           |         |           |                 | 16         | 91.32        | 2         |

|             |                                       | B (FEC Form                                    |                      |                                   | arate schedule(s)               |       |               | R LIN         | UMBE                       | R:               |                         |          | PA        | GE       | 152      | / 183          |  |  |  |
|-------------|---------------------------------------|--|----------------------|-----------------------------------|---------------------------------|-------|---------------|---------------|----------------------------|------------------|-------------------------|----------|-----------|----------|----------|----------------|--|--|--|
| 11          | EIVIIZED DI                           | SBURSEMEN                                      | <u> </u>             |                                   | category of the<br>Summary Page |       | X             | 21b<br>27     | 22<br>28a                  |                  | 23<br>28b               |          | 24<br>28c | В        | 25<br>29 |                |  |  |  |
|             |                                       | ed from such Reports<br>rposes, other than us  |                      |                                   |                                 |       |               |               |                            |                  |                         |          |           | 5        |          |                |  |  |  |
| $\setminus$ | NAME OF COM                           | MITTEE (In Full)                               |                      |                                   |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
| /           | LIBERTARIAN                           | I NATIONAL COM                                 | MITTEE               |                                   |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             |                                       | First, Middle Initial)<br>edHealth (WFG)       |                      |                                   |                                 |       |               |               | Trans<br>Date              |                  | ion ID<br>isburs        |          |           | 3.26     | 961      |                |  |  |  |
|             | Mailing Address                       | PO Box 42924                                   | ļ                    |                                   |                                 |       |               |               | o <sup>M</sup> 5           | М                | / D3                    | 3 0      | / Y       | ž        | 0 0 8    | 3 Y            |  |  |  |
|             | City<br>Philadelphia                  |  |                      | State<br>PA                       | Zip Code<br>19101-2924          |       |               |               | Amou                       | int c            | f Each                  | n Dis    | burse     | men      | t this I | Period         |  |  |  |
|             | Purpose of Disbu<br>Employee Medica   |  |                      |                                   |                                 | Г     | 001           |               |                            | 0                |                         |          |           | . 1      | 67.7     | 5              |  |  |  |
|             | Candidate Name                        |  |                      | atego<br>Type                     |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | Office Sought:                        | General ecify) ▼                               |                      |                                   |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | State:                                | District:                                      |                      |                                   |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | Full Name (Last,<br>Carol McMaho      | First, Middle Initial)<br>n                    |                      |                                   |                                 |       |               |               | Trans                      |                  | <b>ion ID</b><br>isburs |          |           | 3.26     | 843      |                |  |  |  |
|             | Mailing Address                       | PO Box 29                                      |                      |                                   |                                 |       |               |               | 05 M / D 1 9 / Y 2 0 0 8 Y |                  |                         |          |           |          |          |                |  |  |  |
|             | City<br>Monson                        | State Zip Code<br>MA 01057-0029                |                      |                                   |                                 |       |               |               | Amou                       | int c            | f Each                  | n Dis    | burse     | men      | t this I | Period         |  |  |  |
|             | Purpose of Disbu<br>Petitioning Exper | e of Disbursement<br>ng Expense                |                      |                                   |                                 |       | 001           |               | L.                         | 0                |                         |          |           | . 1      | 89.7     | 5              |  |  |  |
|             | Candidate Name                        |  |                      |                                   |                                 | С     | atego<br>Type | •             |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | Office Sought:                        | House<br>Senate<br>President                   | Senate Primary Gener |                                   |                                 |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | State:                                | District:                                      |                      |                                   | <i>37</i> , <b>V</b>            |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | Full Name (Last,<br>Mark J. Meran     | st, First, Middle Initial)                     |                      |                                   |                                 |       |               | Trans<br>Date |                            | ion ID<br>isburs |                         |          | 3.26      | 845      |          |                |  |  |  |
|             | Mailing Address                       | 5883 Anthony                                   | Dr.                  |                                   |                                 |       |               |               | 0 <sup>M</sup> 5           | М                | / D                     | 2 8<br>8 | / Y       | ž        | o ŏ 8    | 3 <sup>Y</sup> |  |  |  |
|             | City<br>Woodbridge                    |  | State<br>VA          | Zip Code<br>22193-0000            |                                 |       |               | Amou          | ınt c                      | f Each           | n Dis                   | burse    | men       | t this I | Period   |                |  |  |  |
|             | Purpose of Disbu                      |  |                      |                                   | Γ                               | 001   |               | L.            | 0                          |                  |                         |          |           | 91.8     | 9        |                |  |  |  |
|             | Candidate Name                        | <u>-                                      </u> |                      |                                   |                                 | atego | ory/          |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | Office Sought:                        | House<br>Senate<br>President                   | Disburse             | ment For:<br>Primary<br>Other (sp | General ecify) ▼                |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |
|             | State:                                | District:                                      |                      | , ( <b>op</b>                     | <i>37</i> ▼                     |       |               |               |                            |                  |                         |          |           |          |          |                |  |  |  |

TOTAL This Period (last page this line number only) .....

В.

C.

| Amount of Each Disbursement Condidate Name   Disbursement For:   State   President   President   State   President   President   State   President   Other (specify)   Primary   General   Other (specify)   Primary   Gene   | SCHEDULE B (FEC Form 3X)                   | Use separate schedule(s |          | FOR LIN     |          |                | :        | P          | AGE  | 153 /     | 183    |
|---|--|-------------------------|----------|-------------|----------|----------------|----------|------------|------|-----------|--------|
| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full)  LIBERTARIAN NATIONAL COMMITTEE  Full Name (Last, First, Middle Initial)  Merchant Services  Mailing Address 890 Mountain Ave  City Purpose of Disbursement Credit Card Processing Fee Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City State Zip Code (Senate Primary General Other (specify) ▼  Transaction ID: SB21B.26963 Date of Disbursement  Other (specify) ▼  Transaction ID: SB21B.26963 Date of Disbursement  Other (specify) ▼  Transaction ID: SB21B.26963 Date of Disbursement  Office Supplies  Category/ Type  Office Supplies  Candidate Name  Office Supplies  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B.26963 Date of Disbursement  Office Supplies  Candidate Name  Transaction ID: SB21B.26963 Date of Disbursement this Perior  Category/ Type  Trype  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B.26964 Date of Disbursement this Perior  Transaction ID: SB21B.26964 Date of Disburse | ITEMIZED DISBURSEMENTS                     | l -                     | X 21b    | 22          | <u> </u> | _              |          | П          |      | 26<br>30b |        |
| Full Name (Last, First, Middle Initial) Merchant Services  Mailing Address 890 Mountain Ave  City New Providence Nu Providence  |  |                         |          |             |          |                | ose of s |            |      |           |        |
| Merchant Services  Mailing Address 890 Mountain Ave  City New Providence NJ 07974-0000  Purpose of Disbursement Credit Card Processing Fee Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City Topeka KS 66611-0000  Category/ Type  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City Topeka KS 66611-0000  Category/ Type  Office Sought: House President Office Supplies Candidate Name  Disbursement For: Primary General Ofther (specify) ▼  Transaction ID: SB21B.26963 Date of Disbursement  Moth Category/ Type  Transaction ID: SB21B.26963 Date of Disbursement this Perior  Transaction ID: SB21B.26963 Date of Disbursement  Moth Category/ Type  Transaction ID: SB21B.26964 Date of Disbursement this Perior  Transaction ID: SB21B.26964 Date of Disbursement  Transaction ID: SB21B.26964 Date of Disbursement  Mailing Address P.O. Box 25000  City Raleigh NC 27640-0640 Purpose of Disbursement NC - Withholding Candidate Name  Category/ Cat |  |                         |          |             |          |                |          |            |      |           |        |
| New Providence Purpose of Disbursement City Topeka Candidate Name  Disbursement City Topeka Candidate Name  Disbursement Coffice Sought:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address Candidate Name  City Topeka Candidate Name  Disbursement City Topeka KS Candidate Name  City Topeka Candidate Name  Disbursement Coffice Sought:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address Candidate Name  City Topeka Candidate Name  Disbursement Coffice Sought: Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City Raleigh NC Cardeqory/ Raleigh NC Cardeqory/ Cardidate Name  Amount of Each Disbursement this Period  Transaction ID: SB21B.26964 Date of Disbursement this Period  Transaction ID: SB21B.26964 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B.26964 Date of Disbursement  Other (specify)  Transaction ID: SB21B.26964 Date of Disbursement  Other (specify)  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/  Amount of Each Disbursement this Period  Category/  Amount of Each Disbursement this Period  Category/  Category/  Amount of Each Disbursement this Period  Category/  Amount of Each Disbursement this Period  Category/   | Merchant Services                          |                         |          |             | Da       | te of          | Disburs  | ement      |      |           | Y      |
| Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City State Disbursement For: Qeneral Coffice Sought: House KS 66611-0000  Purpose of Disbursement Office Supplies  Candidate Name  Disbursement For: Qeneral Coffice Supplies  Coffice Sought: House Primary General Coffice Supplies  Candidate Name  Disbursement For: Primary General Coffice Supplies  Candidate Name  Disbursement For: Primary General Coffice Supplies  Candidate Name  Amount of Each Disbursement this Period State Zip Code NC 27640-0640  Purpose of Disbursement  NC Withholding  Candidate Name  Amount of Each Disbursement this Period Category/  Category/   |  |                         | o        |             | An       | nount          | of Each  | n Disburse | -    | -         | -      |
| Senate President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City State Zip Code KS 66611-0000  Purpose of Disbursement Office Supplies  Candidate Name  Office Sought: House President Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Category/ Type  Other (specify) ▼  Transaction ID: SB21B.26964  Date of Disbursement  Mof M / D1 D / Y 2 0 0 8 Y  Transaction ID: SB21B.26964  Date of Disbursement  Mof M / D1 D / Y 2 0 0 8 Y  Amount of Each Disbursement ID: SB21B.26964  Date of Disbursement  Mof M / D1 D / Y 2 0 0 8 Y  Amount of Each Disbursement  Mof M / D1 D / Y 2 0 0 8 Y  Amount of Each Disbursement this Perior  Category/  Amount of Each Disbursement this Perior  Category/  Amount of Each Disbursement this Perior  Category/  | Credit Card Processing Fee                 |                         |          |             |          | 17             | 72.34    | 1          |      |           |        |
| National Electronic Type, Inc  Mailing Address 2320 S. Kansas Ave  City State Zip Code Topeka KS 66611-0000  Purpose of Disbursement Office Supplies  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Amount of Each Disbursement this Perior  Transaction ID: SB21B.26964  Date of Disbursement Initial Perior  Transaction ID: SB21B.26964  Date of Disbursement this Perior  Amount of Each Disbursement this Perior  Transaction ID: SB21B.26964  Date of Disbursement this Perior  Amount of Each Disbursement this Perior  Transaction ID: SB21B.26964  Date of Disbursement this Perior  Office Sought: Primary General Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code NC 27640-0640  Purpose of Disbursement  NC - Withholding Other (Specify) ▼ Other (Sp | Senate President                           | Primary General         |          |             |          |                |          |            |      |           |        |
| Topeka KS 66611-0000  Purpose of Disbursement Office Supplies Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Raleigh NC 27640-0640  Purpose of Disbursement NC - Withholding Candidate Name  KS 66611-0000  O01 Category/ Type  Transaction ID: SB21B.26964 Date of Disbursement  M 5 M / D 1 M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   | National Electronic Type, Inc              |                         |          |             | Da       | te of          | Disburs  | ement      |      |           | Y      |
| Purpose of Disbursement Office Supplies Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Raleigh NC 27640-0640  Purpose of Disbursement NC - Withholding Candidate Name  138.05  Transaction ID: SB21B.26964 Date of Disbursement  05 M / D D D V Y Y O O 8  Amount of Each Disbursement this Period Category/  |  |                         | า        |             | An       | nount          | of Each  | n Disburse | emen | t this F  | Period |
| Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Raleigh NC 27640-0640  Purpose of Disbursement NC - Withholding Candidate Name  Disbursement For: Primary General Other (specify) ▼  Transaction ID: SB21B.26964 Date of Disbursement  M   | Purpose of Disbursement<br>Office Supplies | NS 00011-0000           | Cat      | tegory/     |          |                |          |            | 1    | 38.05     | 5      |
| Full Name (Last, First, Middle Initial) North Carolina Department of Revenue  Mailing Address P.O. Box 25000  City State Zip Code Raleigh NC 27640-0640  Purpose of Disbursement NC - Withholding Candidate Name  Transaction ID: SB21B.26964 Date of Disbursement  O 5 M / D 0 0 1 1 3 / Y 2 0 0 8 Y  Amount of Each Disbursement this Period 61.00  | Senate President                           | Primary General         | <u> </u> | <u>) po</u> |          |                |          |            |      |           |        |
| City State Zip Code Raleigh NC 27640-0640  Purpose of Disbursement NC - Withholding Oandidate Name Amount of Each Disbursement this Period 61.00  | Full Name (Last, First, Middle Initial)    |                         |          |             |          |                |          |            | B.26 | 964       |        |
| Raleigh NC 27640-0640  Purpose of Disbursement 61.00  NC - Withholding 001  Candidate Name Category/  | Mailing Address P.O. Box 25000             |                         |          |             | O        | 5 <sup>M</sup> | / D      | 13         | ž    | o ŏ e     | Y      |
| NC - Withholding Candidate Name  O01 Category/  |  |                         | )        |             | An       | nount          | of Each  | n Disburse | -    |           |        |
| Type  | NC - Withholding                           |                         | Cat      | tegory/     |          |                |          |            |      | 61.00     | )      |
| Office Sought:    House   | Senate President                           | Primary General         | •        |             |          |                |          |            |      |           |        |
| State: District:  SUBTOTAL of Disbursements This Page (optional)  | 1  |                         |          | ▶           |          | •              | •        | • • •      | 19   | 71.39     |        |

C.

| 001150111507  |  |                          |   |
|---|--|--------------------------|---|
| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE                 |   |
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page         | (check only 21b 27       | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |   |
| NAME OF COMMITTEE (In Full)   | and address of any pointed to                          | Sommittee to som         | ion communications from such committee  |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                          |   |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: SB21B.26965   |
| North Carolina Department of Revenue  |  |                          | Date of Disbursement  |
| Mailing Address P.O. Box 25000  |  |                          | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z & D \\ D & Z & D \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D & S \\ D & D & D & S \end{bmatrix}$  |
| ,   | State Zip Code NC 27640-0640                           |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |  |                          | 61.00   |
| NC - Withholding Candidate Name   |  | 001<br>Category/<br>Type |   |
| Senate President  | ment For: Primary General Other (specify)              | Ni                       |   |
| State: District:  |  |                          |   |
| Full Name (Last, First, Middle Initial) North Carolina Department of Revenue                              |  |                          | Transaction ID: SB21B.26966 Date of Disbursement  |
| Mailing Address P.O. Box 25000  |  |                          | $\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} 2                                  $   |
| ,   | State Zip Code<br>NC 27640-0640                        |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   | 27040-0040   |                          | 42.00   |
| NC - Withholding  |  | 001                      |   |
| Candidate Name  |  | Category/<br>Type        |   |
| Senate President  | ment For: Primary General Other (specify)              |                          |   |
| State: District:  |  |                          |   |
| Full Name (Last, First, Middle Initial) William Palmer  |  |                          | Transaction ID: SB21B.26847 Date of Disbursement  |
| Mailing Address 5422 Old Park Tree Dr.  |  |                          | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & S & O \\ O & S & O \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix}^{Y} $ |
|   | State         Zip Code           FL         32808-0000 |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |  | 004                      | 1271.12   |
| Petitioning Expense Candidate Name  |  | 001<br>Category/<br>Type |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | туре                     |   |
| State: District:  | , · · · · · · · · · · · · · · · · · · ·                |                          |   |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                          | 1374.12   |

| S  | CHEDULE B (FEC Form  | 3X)                    | Use sepa                           | arate schedule(s)               |      | FOR LIN                 |                  | R:               |                | P              | AGE   | 155 /    | 183   |
|----|--|------------------------|------------------------------------|---------------------------------|------|-------------------------|------------------|------------------|----------------|----------------|-------|----------|-------|
| IT | EMIZED DISBURSEMEN   | ITS                    | for each                           | category of the<br>Summary Page |      | (check or X 21b 27      | 22<br>28a        |                  | 23<br>28b      | 24<br>28c      |       | 25<br>29 | 2 3   |
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|    | NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COM                             | IMITTEE                |                                    |                                 |      |                         |                  |                  |                |                |       |          |       |
|    | Full Name (Last, First, Middle Initial)<br>Austin W Petersen                     |                        |                                    |                                 |      |                         | Date             | of Dis           | burse          |                |       |          | _     |
|    | Mailing Address 309 N. Jordan  | St. Apt 10             | 2                                  |                                 |      |                         | 0 <sup>M</sup> 5 | M /              | <sup>D</sup> 1 | <sup>D</sup> / | ž     | 0 0 8    | Y     |
|    | City<br>Alexandria   |                        | State<br>VA                        | Zip Code<br>22304-0000          |      |                         | Amou             | ınt of           | Each           | Disburse       |       |          | -     |
|    | Purpose of Disbursement Employee Net Pay Candidate Name                          |                        |                                    |                                 | Ca   | 001<br>ategory/         | L.               | •                |                |                | 12    | 93.84    |       |
|    | Office Sought:  Senate President  State:  District:                              | Disburse               | ment For:<br>Primary<br>Other (spe | General ecify) ▼                |      | Туре                    |                  |                  |                |                |       |          |       |
|    | Full Name (Last, First, Middle Initial) Austin W Petersen                        |                        |                                    |                                 |      |                         | Date             | sactio<br>of Dis | burse          |                |       |          | Y     |
|    | Mailing Address 309 N. Jordan  | St. Apt 10             | 2                                  |                                 |      |                         | 0 5              |                  | <sup>D</sup> 2 | 8              | 2     | 0 ŏ 8    |       |
|    | City<br>Alexandria   |                        | State<br>VA                        | Zip Code<br>22304-0000          |      |                         | Amou             | ınt of           | Each           | Disburse       | ement | this P   | eriod |
|    | Purpose of Disbursement<br>Employee Net Pay<br>Candidate Name                    |                        |                                    |                                 |      | 001<br>ategory/         | <u>L.</u>        |                  |                |                | 13    | 24.85    |       |
|    | Office Sought: House   | Dieburea               | ment For:                          |                                 |      | Туре                    | _                |                  |                |                |       |          |       |
|    | Senate President State: District:  | Disburse               | Primary<br>Other (spe              | General ecify) ▼                |      |                         |                  |                  |                |                |       |          |       |
|    | Full Name (Last, First, Middle Initial)<br>Austin W Petersen                     | •                      |                                    |                                 |      |                         | Date             | of Dis           | burse          |                |       |          |       |
|    | Mailing Address 309 N. Jordan  |                        |                                    |                                 | 0 5  | M /                     | <sup>D</sup> 2   | 9 /              | <u>'</u> 2     | 0 0́8          | 1     |          |       |
|    | City<br>Alexandria   | Zip Code<br>22304-0000 |                                    |                                 | Amou | ınt of                  | Each             | Disburse         |                |                | -     |          |       |
|    | Purpose of Disbursement Employee Net Pay Candidate Name                          |                        |                                    |                                 |      | 001<br>ategory/<br>Type |                  |                  |                |                | 10    | 00.00    | •     |
|    | Office Sought: House Senate President  | Disburse               | ment For:<br>Primary<br>Other (spe | General ♥                       |      | ,,                      |                  |                  |                |                |       |          |       |
|    | State: District:   | 1                      |                                    |                                 |      |                         |                  |                  |                |                |       |          |       |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separat                            | e schedule(s)         |              | OR LIN      |                  | R:    |           |     | PA        | AGE   | 156      | / 183          | }         |
|---|--|-----------------------|--------------|-------------|------------------|-------|-----------|-----|-----------|-------|----------|----------------|-----------|
| ITEMIZED DISBURSEMENTS  | for each cate<br>Detailed Sur          |                       | X            | 21b<br>27   | 22<br>28a        |       | 23<br>28b | F   | 24<br>28c |       | 25<br>29 |                | 26<br>30b |
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| NAME OF COMMITTEE (In Full)   |  | 71                    |              |             |                  |       |           |     |           |       |          |                |           |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                       |              |             |                  |       |           |     |           |       |          |                |           |
| Full Name (Last, First, Middle Initial) Mark Pickens  |  |                       |              |             | Date             |       | isburs    | en  |           |       |          | V              |           |
| Mailing Address 167 Noterdame Ave 2nd   | FI                                     |                       |              |             | 0 5              | IWI   | ′ 📙       | 1 3 | 3 ′       | 2     | οŏε      | 3 '            |           |
| ,   |  | ip Code<br>03132-3941 |              |             | Amou             | ınt o | f Each    | n E | Disburse  | -     |          |                | d         |
| Purpose of Disbursement Petitioning Expense   |  |                       | 0            | 01          |                  | _     |           |     |           | Ę     | 570.5    | 0              |           |
| Candidate Name  |  |                       | egory/<br>pe |             |                  |       |           |     |           |       |          |                |           |
| Office Sought: House Disburse Senate President  | General                                |                       |              |             |                  |       |           |     |           |       |          |                |           |
| State: District:  | ```                                    |                       |              |             |                  |       |           |     |           |       |          |                |           |
| Full Name (Last, First, Middle Initial) Karen E. Pierce   |  |                       |              |             | Date             | of D  | isburs    | en  |           |       |          | V              |           |
| Mailing Address 200 W. 34th Ave. #587   |  |                       |              |             | o <sup>M</sup> 5 | М     | / D 2     | 2 9 | 9 /       | Ž     | οŏε      | 3 <sup>*</sup> |           |
| ,   |  | ip Code<br>99503-0000 |              |             | Amou             | ınt o | f Each    | n E | Disburse  | -     |          |                | d         |
| Purpose of Disbursement Petitioning Expense   |  |                       | 0            | 01          |                  |       | -         |     |           | . (   | 690.0    | 0              |           |
| Candidate Name  |  |                       |              | gory/<br>pe |                  |       |           |     |           |       |          |                |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (specify | General (v) ▼         |              |             |                  |       |           |     |           |       |          |                |           |
| State: District:  |  |                       |              |             |                  |       |           |     |           |       |          |                |           |
| Full Name (Last, First, Middle Initial) James Pinkerton   |  |                       |              |             |                  | of D  | isburs    | en  |           |       |          |                |           |
| Mailing Address 1600 N. Oak St. #1817   |  |                       |              |             | 0 5              | М     | / D 2     | 2 - | 1 /       | Ž     | οŏε      | 3 <sup>*</sup> |           |
|   |  | ip Code<br>22209-0000 |              |             | Amou             | ınt o | f Each    | n E | Disburse  | -     | -        |                | d         |
| Purpose of Disbursement<br>Speaker Fee  |  | 0                     | 01           | L.          |                  |       | 0         |     | 22        | 252.0 | 0        |                |           |
| Candidate Name  |  |                       |              | gory/<br>pe |                  |       |           |     |           |       |          |                |           |
| Senate President  | ment For:<br>Primary<br>Other (specify | General<br>y) ▼       |              |             |                  |       |           |     |           |       |          |                |           |
| State: District:  |  |                       |              |             |                  |       |           |     |           |       |          |                | _         |
| SUBTOTAL of Disbursements This Page (optional) .  |  | <br>                  | <b>•</b>     |             |                  |       |           |     | 35        | 12.5  | 0        |                |           |
| TOTAL This Period (last page this line number only)   |  |                       | <br>         | •           |                  |       |           |     |           |       |          | _              |           |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s                                | ) FOR LINE (check onl    | NUMBER: PAGE 157/183                                  |
|---|--|--------------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | X 21b 27                 | 22 23 24 25 26<br>28a 28b 28c 29 30b                  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                          |   |
| Full Name (Last, First, Middle Initial) PNC - Riggs Bank  Mailing Address 2600 Virginia Ave NW            |  |                          | Transaction ID: SB21B.26967 Date of Disbursement    M |
| City  | State Zip Code   |                          | Amount of Each Disbursement this Period               |
| Washington Purpose of Disbursement Bank Service Charges Candidate Name                                    | DC 20037-0000  | 001<br>Category/         | 47.65   |
|   | ement For: Primary General                             | Type                     |   |
| State: District:  Full Name (Last, First, Middle Initial)   | Other (specify)  |                          | Transaction ID: SB21B.26968                           |
| PNC Bank Visa  Mailing Address 2600 Virginia Ave NW   |  |                          | Date of Disbursement  0 5                             |
|   | State Zip Code   |                          | Amount of Each Disbursement this Period               |
| Purpose of Disbursement   | DC 20037-0000  |                          | 917.70  |
| PNC Visa Card Payment(See Attached Memo)  Candidate Name  |  | 001<br>Category/<br>Type |   |
| Senate President  | ement For: Primary General Other (specify)             |                          |   |
| State: District: Full Name (Last, First, Middle Initial) Sheraton Denver Hotel                            |  |                          | Transaction ID: SB21B.26968.0 Date of Disbursement    |
| Mailing Address 1550 Court Plc Attn: Soulaiman Bahalla  |  |                          | 05 15 7 20 08   |
| Denver  | State         Zip Code           CO         80202-5107 |                          | Amount of Each Disbursement this Period 917.70        |
| Purpose of Disbursement Employee Travel Expense-Hotel Candidate Name                                      |  | 002<br>Category/         |   |
| Senate  | ement For: Primary General                             | Туре                     | [MEMO ITEM]   |
| State: President  District:   | Other (specify)  |                          |   |
| SUBTOTAL of Disbursements This Page (optional) .  |  | <b>&gt;</b>              | 965.35  |

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| ago# 20001001000  |   |                      |  |
|---|---|----------------------|--|
| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE (check only |  |
|   | Detailed Summary Fage   | 27                   | 28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                      |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |   |                      |  |
| Full Name (Last, First, Middle Initial) PNC Master Card   |   |                      | Transaction ID: SB21B.26972 Date of Disbursement   |
| Mailing Address PO Box 790350   |   |                      | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & S \end{smallmatrix} \end{bmatrix}$   |
| •   | State Zip Code MO 63179-0350  |                      | Amount of Each Disbursement this Period  |
| Purpose of Disbursement PNC Mastercard Payment-See Attached Memo  |   | 001                  | 10256.34   |
| Candidate Name  | '   | Category/<br>Type    |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) ▼                                   |                      |  |
| State: District:  |   |                      |  |
| Full Name (Last, First, Middle Initial)  Ad Magic Inc.  |   |                      | Transaction ID: SB21B.26972.0 Date of Disbursement   |
| Mailing Address 125 Main St.  |   |                      | $\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} & \begin{bmatrix} D \\ D \end{smallmatrix} & \begin{bmatrix} V \\ D \end{smallmatrix} & \begin{bmatrix} V$ |
| •   | State Zip Code<br>NJ 07857-0000   |                      | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Office Supplies   |   | 001                  | 850.50   |
| Candidate Name  |   | Category/<br>Type    | [MEMO ITEM]  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)                                     |                      | [mcmo ricin]   |
| State: District:  |   |                      |  |
| Full Name (Last, First, Middle Initial) Airtran Airways   |   |                      | Transaction ID: SB21B.26972.1 Date of Disbursement   |
| Mailing Address 1800 Phoenix Blvd. Ste #  | 126   |                      | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \\ D & D \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \\ D & D & D \\ D & D & D \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & D \\ D & D \\ D & D & D \\ D \\ D & D \\ D & D \\ D & D \\ D \\ D & D \\ D & D \\ D & D \\ D \\ D \\ D & D \\ D & D \\ D \\ D & D \\ D \\ D & D \\ D \\ D \\ D & D \\ D \\ D \\ D & D \\ D$  |
|   | State Zip Code<br>GA 30349-5547   |                      | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   |   |                      | 278.50   |
| Employee Travel Expense-Air Candidate Name  |   | 002<br>Category/     |  |
|   |   | Type                 | [MEMO ITEM]  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) ▼                                   |                      | [MEMOTICM]   |
| State: District:  |   |                      |  |
| SUBTOTAL of Disbursements This Page (optional) .  |   |                      | 10256.34   |

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C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                          |                          | NUMBER: PAGE 159/183   |
|---|---|--------------------------|--|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page | (check only 21b 27       | y one)<br>22 23 24 25 26<br>28a 28b 28c 29 30b   |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                          |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  | and address of any pointed o                      | ommittee to so           | inch contributions from such committee   |
| Full Name (Last, First, Middle Initial)   |   |                          | Transaction ID: SB21B.26972.2  |
| Aspen Snowmass Express  |   |                          | Date of Disbursement  O 5 2 3 2 0 0 8  |
| Mailing Address 39551 Hwy 82  |   |                          | 05 23 2008   |
| ,   | State Zip Code<br>CO 81611-0000                   |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Convention Ground Transport   |   | 000                      | 360.00   |
| Candidate Name  |   | 002<br>Category/<br>Type |  |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)         | Турс                     | [MEMO ITEM]  |
| Full Name (Last, First, Middle Initial)   |   |                          | Transaction ID: SB21B.26972.3  |
| Awards for Anything   |   |                          | Date of Disbursement   |
| Mailing Address 556 Garrisonville Rd # 20   | )2  |                          | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z & S \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix}^{Y}$ |
|   | State Zip Code<br>VA 22554-0000                   |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   | VA 22334-0000                                     |                          | 858.90   |
| Office Supplies Candidate Name  |   | 001<br>Category/<br>Type |  |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)         | .,,,,                    | [MEMO ITEM]  |
| Full Name (Last, First, Middle Initial) FedEx Kinko's   |   |                          | Transaction ID: SB21B.26972.4 Date of Disbursement   |
| Mailing Address 13155 Noel Rd., Ste. 160  | 0   |                          | $\begin{bmatrix}\begin{smallmatrix}M\\05\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\23\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2008\end{smallmatrix}\end{bmatrix}^Y$                  |
|   | State Zip Code<br>TX 75240-0000                   |                          | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Office Supplies   |   | 001                      | 556.50   |
| Candidate Name  |   | Category/                |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify) ▼       | Туре                     | [MEMO ITEM]  |
| State: District:  | (Spoon) <b>V</b>                                  |                          |  |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <b>&gt;</b>              | 0.00   |

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C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               |                         | LINE N   | NUMBE            | R:                        | PA        | AGE 160            | 0 / 183   |
|---|--|-------------------------|----------|------------------|---------------------------|-----------|--------------------|-----------|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | X 21                    | ıb 🗀     | 22<br>28a        | 23<br>28b                 | 24<br>28c | 25<br>29           | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                         |          |                  |                           |           |                    |           |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                         |          |                  |                           |           |                    |           |
| Full Name (Last, First, Middle Initial) GoToMyPC.com  |  |                         |          | Date of          | saction ID:<br>of Disburs | _         |                    |           |
| Mailing Address 5385 Hollister Ave #111   |  |                         |          | 0 5              |                           |           | ŽOĎ                |           |
| ,   | State         Zip Code           CA         93111-0000 |                         |          | Amou             | int of Each               | Disburse  |                    |           |
| Purpose of Disbursement PC Access Service Candidate Name  |  | 001<br>Category<br>Type |          | L.               |                           |           | 21.9               | 96        |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)              | .,,,,,                  |          | [MEM             | IO ITEM]                  |           |                    |           |
| Full Name (Last, First, Middle Initial) Image Media Inc.  |  |                         |          | Date             | saction ID:<br>of Disburs | _         | 3.26972<br>´ ž 0 ŏ |           |
| Mailing Address 39346 US Hwy 19 North  City   | State Zip Code   |                         |          | -                | unt of Each               |           |                    |           |
| Tarpon Springs  | FL 34689-3987  |                         |          | Alliou           | int or Lacin              | Disburse  | 213.               |           |
| Purpose of Disbursement Office Supplies Candidate Name  |  | 001<br>Category         | /        |                  | • •                       |           |                    |           |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)              | Туре                    |          | [MEM             | IO ITEM]                  |           |                    |           |
| Full Name (Last, First, Middle Initial) InTown Suites   |  |                         |          |                  | saction ID:<br>of Disburs | _         | 3.26972            | 2.7       |
| Mailing Address 2727 Paces Ferry Road Suite 2-1200  |  |                         |          | 0 <sup>M</sup> 5 | M / D 2                   | 23 /      | ŽOŎ                | 8 Y       |
| City  | State Zip Code<br>GA 30339-0000                        |                         |          | Amou             | int of Each               | Disburse  | ment this          | Period    |
| Purpose of Disbursement<br>Employee Travel Expense-Hotel  |  | 002                     |          | L.               |                           |           | 330.8              | 81        |
| Candidate Name  |  | Category<br>Type        |          | [MEM             | IO ITEM]                  |           |                    |           |
| Senate President  | ment For: Primary General Other (specify) ▼            |                         |          | F1A1 ₹1A1        | IO II EIVI]               |           |                    |           |
| State: District:  |  |                         |          | _                | v v                       |           |                    |           |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                         | <u> </u> | <u>L</u>         |                           |           | 0.0                | 00        |

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C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               |                          | NUMBER: PAGE 161 / 183  |
|---|--|--------------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page         | (check only 21b 27       | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  | and address of any pointed of                          |                          |   |
| Full Name (Last, First, Middle Initial) Lyris Tech - Sparklist  |  |                          | Transaction ID: SB21B.26972.8 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address PO Box 49023  |  |                          | 05 23 2008  |
| •   | State         Zip Code           CA         95161-9023 |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Email List Hosting Service  |  | 001                      | 3000.00   |
| Candidate Name  |  | Category/<br>Type        | MENO ITEM   |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)              |                          | [MEMO ITEM]   |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: SB21B.26972.9   |
| PayPal Merchant Serrvices   |  |                          | Date of Disbursement  |
| Mailing Address 2211 N. First St.   |  |                          | 05  |
| •   | State Zip Code<br>CA 95131-0000                        |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   | 93131-0000   |                          | 1.95  |
| PayPal Merchant Set Up Fee Candidate Name   |  | 001<br>Category/<br>Type |   |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)              | 71                       | [MEMO ITEM]   |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: SB21B.26972.10  |
| Postmaster  |  |                          | Date of Disbursement  |
| Mailing Address US Post Office Watergat 2500 virginia Ave NW  |  |                          | 05 23 2008  |
|   | State Zip Code DC 20037-0000                           |                          | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Postage  |  | 001                      | 52.75   |
| Candidate Name  |  | Category/<br>Type        |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | Турс                     | [MEMO ITEM]   |
| State: District:  | - (-1: >=·/) <b>V</b>                                  |                          |   |
| SUBTOTAL of Disbursements This Page (optional) .  |  | <b>&gt;</b>              | 0.00  |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               |                    | NUMBER: PAGE 162/183   |
|---|--|--------------------|--|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page         | (check only 21b 27 | y one) 22 23 24 25 26 26 28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  | by any person f    | for the purpose of soliciting contributions  |
| NAME OF COMMITTEE (In Full)   | e and address of any political c                       | committee to so    | iicit contributions from Such committee  |
| LIBERTARIAN NATIONAL COMMITTEE  |  |                    |  |
| Full Name (Last, First, Middle Initial)<br>Rackspace US Inc.  |  |                    | Transaction ID: SB21B.26972.11 Date of Disbursement  |
| Mailing Address 9725 Datapoint Dr. #100   |  |                    | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & S \end{smallmatrix} \end{bmatrix}$ |
| •   | State         Zip Code           TX         78229-0000 |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Website Hosting Service   |  | 001                | 199.00   |
| Candidate Name  |  | Category/<br>Type  | · · · · · · · · · · · · · · · · · · ·  |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)              |                    | [MEMO ITEM]  |
| Full Name (Last, First, Middle Initial)   |  |                    | Transaction ID: SB21B.26972.12   |
| Sheraton Denver Hotel   |  |                    | Date of Disbursement   |
| Mailing Address 1550 Court Plc Attn: Soulaiman Bahalla  |  |                    | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & R \end{smallmatrix} \end{bmatrix}$ |
|   | State Zip Code<br>CO 80202-5107                        |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement   | 00202-3107   |                    | 454.80   |
| Employee Travel Expense-Hotel  Candidate Name   |  | 002<br>Category/   |  |
| Office Sought: House Disburse   | ment For:  | Туре               | [MEMO ITEM]  |
| Senate President  | Primary General Other (specify)                        |                    |  |
| State: District:  |  |                    |  |
| Full Name (Last, First, Middle Initial) Staples Direct  |  |                    | Transaction ID: SB21B.26972.13 Date of Disbursement  |
| Mailing Address 1901 L St NW  |  |                    | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & S \end{smallmatrix} \end{bmatrix}$ |
|   | State         Zip Code           DC         20036-0000 |                    | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Office Supplies  |  | 001                | 366.60   |
| Candidate Name  |  | Category/<br>Type  |  |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              | 71.                | [MEMO ITEM]  |
| State: District:  | · · · · · · · ·  |                    |  |
| SUBTOTAL of Disbursements This Page (optional) .  |  |                    | 0.00   |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)              | FOR LINE          | E NUMBER: PAGE 163 / 183  |
|---|---------------------------------------|-------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the              | (check on         | ly one)   |
|   | Detailed Summary Page                 | X 21b 27          | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                       |                   |   |
| or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)                        | e and address of any political        | committee to so   | Dilcit contributions from such committee  |
| LIBERTARIAN NATIONAL COMMITTEE  |                                       |                   |   |
| Full Name (Last, First, Middle Initial)   |                                       |                   | Transaction ID: SB21B.26972.14  |
| Super 8 Motels  |                                       |                   | Date of Disbursement  |
| Mailing Address 1 Sylvan Way  |                                       |                   | 05 7 23 7 2008  |
| ,   | State Zip Code NJ 07054-0000          |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |                                       |                   | 1209.60   |
| Employee Travel Expense-Hotel  Candidate Name   |                                       | 002<br>Category/  |   |
|   |                                       | Туре              | [MEMO ITEM]   |
| Office Sought: House Disburse   | ment For:    Primary   General        |                   | [   |
| President   | Other (specify)                       |                   |   |
| State: District:  |                                       |                   |   |
| Full Name (Last, First, Middle Initial) ThePlanet.com   |                                       |                   | Transaction ID: SB21B.26972.15 Date of Disbursement   |
| Mailing Address 1333 N. Stemmons Fwy  | #110                                  |                   | 05  |
|   |                                       |                   |   |
| ,   | State Zip Code TX 75207-3724          |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   |                                       | 004               | 574.00  |
| Web Hosting Server Candidate Name   |                                       | 001<br>Category/  |   |
|   |                                       | Туре              | [MEMO ITEM]   |
| Office Sought: House Disburse   | ment For:    Primary   General        |                   | [   |
| President   | Other (specify) ▼                     |                   |   |
| State: District: Full Name (Last, First, Middle Initial)  |                                       |                   |   |
| USAirways   |                                       |                   | Transaction ID: SB21B.26972.16 Date of Disbursement   |
| Mailing Address 2345 Crystal Dr   |                                       |                   | $ \begin{bmatrix} M & M \\ O & S \end{bmatrix} & \begin{bmatrix} D & D \\ D & D \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ D & O & O \end{bmatrix} & \begin{bmatrix} Y & Y \\ D & O & O \end{bmatrix} $ |
|   | State Zip Code<br>VA 22227-0000       |                   | Amount of Each Disbursement this Period   |
| Purpose of Disbursement   | VA 22221-0000                         |                   | 927.22  |
| Employee Travel Expense-Air   |                                       | 002               |   |
| Candidate Name  |                                       | Category/<br>Type | IMENO ITEM  |
| ° 🗎   | ment For:                             |                   | [MEMO ITEM]   |
| Senate   President  | Primary General Other (specify)       |                   |   |
| State: District:  | , , , , , , , , , , , , , , , , , , , |                   |   |
| SUBTOTAL of Disbursements This Page (optional) .  |                                       |                   | 0.00  |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule                             | S) (check on      | E NUMBER: PAGE 164 / 183  |
|---|---|-------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page | — r               | 22 23 24 25 26<br>28a 28b 28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |   |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |   |                   |   |
| Full Name (Last, First, Middle Initial) PNC Master Card  Mailing Address PO Box 790350                    |   |                   | Transaction ID: SB21B.27000 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City  | State Zip Code<br>MO 63179-035                    | in                | Amount of Each Disbursement this Period   |
| Purpose of Disbursement PNC Mastercard Payment-See Attached Memo Candidate Name                           | WIC 03173 000                                     | 001<br>Category/  | 5924.77   |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | ment For: Primary General Other (specify)         | Type              |   |
| Full Name (Last, First, Middle Initial) Ad Magic Inc.  Mailing Address 125 Main St.                       |   |                   | Transaction ID: SB21B.27000.0 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City  | State Zip Code                                    |                   | Amount of Each Disbursement this Period   |
| Netcong Purpose of Disbursement Office Supplies   | NJ 07857-000                                      | 001               | 124.06  |
| Candidate Name  |   | Category/<br>Type | [MEMO ITEM]   |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary Genera Other (specify) ▼        | d .               |   |
| Full Name (Last, First, Middle Initial) American Airlines   |   |                   | Transaction ID: SB21B.27000.2 Date of Disbursement  |
| Mailing Address PO Box 582820 - MD766   | <u> </u>  |                   | 05 7 3 1 7 2 0 0 8  |
| Tulsa   | State Zip Code<br>OK 74158-282                    | 20                | Amount of Each Disbursement this Period 291.00  |
| Purpose of Disbursement Employee Travel-Airfare Candidate Name  |   | 002<br>Category/  | 291.00  |
| Office Sought: House Disburse Senate  | ment For: Primary Genera                          | Туре              | [MEMO ITEM]   |
| State: President  District:   | Other (specify)                                   |                   |   |
| SUBTOTAL of Disbursements This Page (optional) .  |   | <b>&gt;</b>       | 5924.77   |

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| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                               | FOR LINE           |   |
|---|--|--------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | (check only 21b 27 | one)  22  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  | y any person fo    | or the purpose of soliciting contributions  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                    |   |
| Full Name (Last, First, Middle Initial) Buckhorn Exchange   |  |                    | Transaction ID: SB21B.27000.3 Date of Disbursement  |
| Mailing Address 1000 Osage St   |  |                    | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & S & D \\ O & S & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix} $ |
|   | State Zip Code CO 80204-3918                           |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>Chair's Circle Dinner  |  | 001                | 1622.57   |
| Candidate Name  |  | Category/<br>Type  | [MEMO ITEM]   |
| Senate President  | ement For: Primary General Other (specify)             |                    | [MEMOTIEM]  |
| State: District:  |  |                    |   |
| Full Name (Last, First, Middle Initial) FedEx Kinko's   |  |                    | Transaction ID: SB21B.27000.6 Date of Disbursement  |
| Mailing Address 13155 Noel Rd., Ste. 160  | 00   |                    | $ \begin{bmatrix} M & 5 \\ 0 & 5 \end{bmatrix} \begin{bmatrix} M & 3 \\ 1 \end{bmatrix} \begin{bmatrix} M & Y \\ 2 & 0 & 0 \\ 0 & 8 \end{bmatrix} $   |
|   | State         Zip Code           TX         75240-0000 |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement Office Supplies   | 1  | 001                | 603.23  |
| Candidate Name  |  | Category/<br>Type  |   |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)              |                    | [MEMO ITEM]   |
| State: District:  | , (1 <i>3)</i> , <b>(</b>                              |                    |   |
| Full Name (Last, First, Middle Initial) Google Ad Works   |  |                    | Transaction ID: SB21B.27000.7 Date of Disbursement  |
| Mailing Address 1600 Amphitheatre Prky  |  |                    | $\begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} / \begin{bmatrix} 0.3 & 1 \\ 0.3 & 1 \end{bmatrix} / \begin{bmatrix} 0.3 & 0.3 & 0.3 \\ 0.3 & 0.3 & 0.3 \end{bmatrix}$  |
|   | State Zip Code CA 94043-1351                           |                    | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>LP Branding Marketing Expense  |  | 001                | 140.77  |
| Candidate Name  |  | Category/<br>Type  | [MEMO ITEM]   |
| Office Sought: House Disburse Senate President  | ement For: Primary General Other (specify)             |                    | [memo Hem]  |
| State: District:  |  |                    |   |
| SURTOTAL of Dichursements This Page (ontional)  |  |                    | 0.00  |

| $\leq 0$ |  | D /FF                            | $\sim$ $\sim$ |                                     |   |        |               |        |  |   |           |        |                |        |          |                |
|----------|--|----------------------------------|---------------|-------------------------------------|---|--------|---------------|--------|--|---|-----------|--------|----------------|--------|----------|----------------|
|          | CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS |                                  | •             |                                     | Use separate schedule(s) for each category of the |        |               |        | NE NUMBER: PAGE 166 / 183 only one)  |   |           |        |                |        |          |                |
| 111      | =WII∠ED DI                                   | <b>OBUKSEME</b>                  | 115           | Detailed                            | Summary Page                                      |        | Ř             | 21b 27 | 22<br>28a  | П                                       | 23<br>28b | П      | 24<br>28c      | П      | 25<br>29 | П              |
| ٩n١      | Information copi                             | ed from such Report              | s and Staten  | nents may n                         | ot be sold or used                                | l by a | any i         |        |  | ırpos                                   |           | olicit |                | ontrik |          | <br>is         |
|          |  | rposes, other than us            |               |                                     |   |        |               |        |  |   |           |        |                |        |          |                |
| ١.       | NAME OF COM                                  | , ,                              |               |                                     |   |        |               |        |  |   |           |        |                |        |          |                |
| /        | LIBERTARIAN                                  | I NATIONAL CON                   | MITTEE        |                                     |   |        |               |        |  |   |           |        |                |        |          |                |
|          | Full Name (Last,<br>InTown Suites            | First, Middle Initial)           |               |                                     |   |        |               |        | <b>Trans</b> Date  |   |           |        |                | B.27   | '000.    | 8              |
|          | Mailing Address                              | 2727 Paces For Suite 2-1200      | erry Road     |                                     |   |        |               |        | 0 <sup>M</sup> 5   | М                                       | / D;      | 3 1    |                | ž      | οŏ       | 8 <sup>Y</sup> |
|          | City<br>Atlanta                              |                                  |               | State<br>GA                         | Zip Code<br>30339-0000                            |        |               |        | Amou   | ınt o                                   | f Each    | n Dis  | burse          | emen   | t this   | Perio          |
|          | Purpose of Disbu                             | ursement                         |               |                                     |   |        | U             | -      |  |   |           |        |                | 11     | 19.7     | '6             |
|          | Employee Travel                              |                                  |               |                                     |   | L      | 002           |        |  |   |           |        |                |        |          |                |
|          | Candidate Name                               |                                  |               |                                     |   |        | atego<br>Type |        | <b></b>  |   |           | _      |                |        |          |                |
|          | Office Sought:                               | House Senate President           | Disburse      | ement For:<br>Primary<br>Other (spe | General ecify) ▼                                  |        |               |        | [MEN   | 10 1                                    | TEM       | ]      |                |        |          |                |
|          | State:                                       | District:                        |               |                                     |   |        |               |        |  |   |           |        |                |        |          |                |
|          | Full Name (Last,<br>Officemax                | First, Middle Initial)           |               |                                     |   |        |               |        | <b>Trans</b> Date  |   | isburs    | eme    |                | B.27   | '000.    | 9              |
|          | Mailing Address                              | 3605 Warrens                     | ville Cente   | er Rd                               |   |        |               |        | $ \begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 1 \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & 0 & Y \\ 2 & 0 & 0 \end{bmatrix} $ |   |           | o ŏ    | 8 <sup>Y</sup> |        |          |                |
|          | City<br>Shaker Height                        | s                                |               | State<br>OH                         | Zip Code<br>44122-0000                            |        |               |        | Amou   | Amount of Each Disbursement this Period |           |        |                |        |          |                |
|          | Purpose of Disbu<br>Convention Supp          |                                  |               |                                     |   |        | 001           |        | L.   |   |           |        |                | _      | 20.0     | )1             |
|          | Candidate Name                               |                                  |               |                                     |   |        | atego<br>Type | ory/   |  |   |           | _      |                |        |          |                |
|          | Office Sought:                               | House Senate President           | Disburse      | ement For:<br>Primary<br>Other (spe | General   |        |               |        | [MEN   | 101                                     | TEM       | J      |                |        |          |                |
|          | State:                                       | District:                        |               | ] - 1.1-1. (-)                      | <b>√</b>  |        |               |        |  |   |           |        |                |        |          |                |
|          | •  | First, Middle Initial)           | -1            |                                     |   |        |               |        | Trans  | sacti                                   | on ID     | : S    | B21            | B.27   | '000.    | 10             |
|          | Sheraton Denv                                | ver Hotel                        |               |                                     |   |        |               |        | Date   | of D                                    | isburs    | eme    |                |        |          |                |
|          | Mailing Address                              | 1550 Court Ple<br>Attn: Soulaima |               |                                     |   |        |               |        | o <sup>M</sup> 5   | М                                       | / D       | 3 1    | <u>′</u> [     | ž      | 0 Ŏ      | 8 <sup>Y</sup> |
|          | City<br>Denver                               |                                  |               | State<br>CO                         | Zip Code<br>80202-5107                            |        |               |        | Amou   | ınt o                                   | f Each    | n Dis  | burse          | emen   | t this   | Perio          |
|          | Purpose of Disbu                             | ursement                         |               |                                     | 30202 3107  |        | _             |        |  |   |           |        |                | 14     | 115.1    | 3              |
|          | Employee Travel                              | -Lodging                         |               |                                     |   | 002    | 2             |        |  |   |           |        |                |        |          |                |
|          | Candidate Name                               |                                  |               |                                     |   |        | atego<br>Type |        |  |   |           | _      |                |        |          |                |
|          | Office Sought:                               | House<br>Senate<br>President     | Disburse      | ement For: Primary Other (spe       | General   |        |               |        | [MEN   | 10 I                                    | TEM       | J      |                |        |          |                |
|          | State:                                       | District:                        | -             | . (-1-                              | <i>→</i>  |        |               |        |  |   |           |        |                |        |          |                |

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| SCHEDULE B (FEC Form 3X)                                   |   | FOR LINE                 | NE NUMBER: PAGE 167 / 183                        |  |  |  |  |  |  |  |  |
|--|---|--------------------------|--|--|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS                                     | Use separate schedule(s) for each category of the | (check on                |  |  |  |  |  |  |  |  |  |
|  | Detailed Summary Page                             | X 21b 27                 | 22 23 24 25 26<br>28a 28b 28c 29 30b             |  |  |  |  |  |  |  |  |
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| or for commercial purposes, other than using the name      | and address of any political                      | committee to se          | blicit contributions from such committee         |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE |   |                          |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)                    |   |                          | Transaction ID: SB21B.27000.11                   |  |  |  |  |  |  |  |  |
| Southwest Airlines   |   |                          | Date of Disbursement                             |  |  |  |  |  |  |  |  |
| Mailing Address PO Box 36662                               |   |                          | 05 7 3 1 7 2 0 0 8                               |  |  |  |  |  |  |  |  |
| •  | State Zip Code<br>TX 75235-0000                   |                          | Amount of Each Disbursement this Period          |  |  |  |  |  |  |  |  |
| Purpose of Disbursement                                    | 75255-0000  |                          | 181.50   |  |  |  |  |  |  |  |  |
| Employee Travel-Airfare                                    |   | 002                      |  |  |  |  |  |  |  |  |  |
| Candidate Name   |   | Category/<br>Type        |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disburser Senate President            | ment For: Primary General Other (specify)         |                          | [MEMO ITEM]                                      |  |  |  |  |  |  |  |  |
| State: District: Full Name (Last, First, Middle Initial)   |   |                          |  |  |  |  |  |  |  |  |  |
| Roger Pope   |   |                          | Transaction ID: SB21B.26856 Date of Disbursement |  |  |  |  |  |  |  |  |
| Mailing Address 8526 Northmont Dr.                         |   |                          | Amount of Each Disbursement this Period          |  |  |  |  |  |  |  |  |
| •  | State Zip Code<br>TX 78239-0000                   |                          |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Petitioning Expense                |   | 001                      | 1213.50  |  |  |  |  |  |  |  |  |
| Candidate Name   |   | Category/<br>Type        |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disburser Senate President            | ment For: Primary General Other (specify)         |                          |  |  |  |  |  |  |  |  |  |
| State: District: Full Name (Last, First, Middle Initial)   |   |                          | ODO/D 00057                                      |  |  |  |  |  |  |  |  |
| Roger Pope   |   |                          | Transaction ID: SB21B.26857 Date of Disbursement |  |  |  |  |  |  |  |  |
| Mailing Address 8526 Northmont Dr.                         |   |                          | 05 12 7 2008                                     |  |  |  |  |  |  |  |  |
|  | State Zip Code<br>TX 78239-0000                   |                          | Amount of Each Disbursement this Period          |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Petitioning Expense                |   | 004                      | 574.50   |  |  |  |  |  |  |  |  |
| Candidate Name   |   | 001<br>Category/<br>Type |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disburser Senate President            | ment For: Primary General Other (specify)         | . 750                    |  |  |  |  |  |  |  |  |  |
| State: District:   |   |                          |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)             |   | <b>_</b>                 | 1788.00  |  |  |  |  |  |  |  |  |

| 9              | SCHEDULE B (FEC Form 3X)  | Use sepa                            | _                            |              | INE NUMBER: PAGE 168 / 18 only one) |          |  |       |           |     |                  |      |           |           |
|----------------|---|-------------------------------------|------------------------------|--------------|-------------------------------------|----------|--|-------|-----------|-----|------------------|------|-----------|-----------|
| ľ              | TEMIZED DISBURSEMENTS   |                                     | category of the Summary Page | X            | 21b 27                              |          | <sup>2)</sup><br>22<br>28a                     |       | 23<br>28b | F   | 24               | , F  | 25<br>29  | 26<br>30k |
|                | Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                     |                              |              |                                     |          |  |       |           |     |                  |      |           | 5         |
|                | NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |                                     |                              |              |                                     |          |  |       |           |     |                  |      |           |           |
| <b>∠</b><br>A. | Full Name (Last, First, Middle Initial) Roger Pope  |                                     |                              |              |                                     |          |  |       | on IE     |     | SB2 <sup>-</sup> | 1B.2 | 6858      |           |
|                | Mailing Address 8526 Northmont Dr.  |                                     |                              |              |                                     |          | o <sup>M</sup> 5                               | М     | / D       | 2   | 9 /              | Y    | δ o δ ε   | 3 Y       |
|                | •   | State<br>TX                         | Zip Code<br>78239-0000       |              |                                     | <i>A</i> | mou  | ınt o | f Eac     | h [ | Disburs          | -    | nt this F |           |
|                | Purpose of Disbursement<br>Petitioning Expense  |                                     |                              | 001          |                                     |          |  |       |           |     |                  |      | 508.50    | )         |
|                | Candidate Name  |                                     |                              | ateg<br>Type | -                                   |          |  |       |           |     |                  |      |           |           |
|                | Senate President  | ment For:<br>Primary<br>Other (spec | General cify) ▼              |              |                                     |          |  |       |           |     |                  |      |           |           |
| _              | State: District:  Full Name (Last, First, Middle Initial)   |                                     |                              |              |                                     | _        |  |       |           |     |                  |      |           |           |
| В.             | Postmaster  |                                     |                              |              |                                     |          | )ate   |       | isburs    | ser |                  |      |           | Υ         |
|                | Mailing Address US Post Office Watergate 2500 virginia Ave NW   |                                     |                              |              | 0 5                                 | IWI      | Ĺ  | 1 :   | 5 /       | 2   | ž o ŏ 8          | 3    |           |           |
|                | Washington  | State<br>DC                         | Zip Code<br>20037-0000       |              |                                     | <i>,</i> | Amount of Each Disbursement this Period 500.00 |       |           |     |                  |      |           |           |
|                | Purpose of Disbursement Postage Candidate Name  |                                     |                              | 001          |                                     | l I      | •  |       |           |     | -                | •    | 500.00    | ,         |
|                |   |                                     |                              | ateg<br>Typ  |                                     |          |  |       |           |     |                  |      |           |           |
|                | Office Sought: House Disburse Senate President State: District:   | ment For:<br>Primary<br>Other (spec | General cify) ▼              |              |                                     |          |  |       |           |     |                  |      |           |           |
| С.             | Full Name (Last, First, Middle Initial) Postmaster - Walton Press   |                                     |                              |              |                                     |          | )ate   | of D  | isburs    | ser |                  |      |           |           |
|                | Mailing Address Walton Press<br>402 Mavfield Dr   |                                     |                              |              |                                     |          | o <sup>M</sup> 5                               | М     | / D       | 0   | 8 /              | Y    | 0 0 E     | 3         |
|                |   | State<br>GA                         | Zip Code<br>30655-0000       |              |                                     | <i>A</i> | mou  | ınt o | f Eac     | h [ | Disburs          |      | nt this F |           |
|                | Purpose of Disbursement Postage   |                                     |                              | 001          |                                     |          | •  | _     | •         |     |                  | 124  | 458.90    | )         |
|                | Candidate Name  |                                     |                              | ateg<br>Type |                                     |          |  |       |           |     |                  |      |           |           |
|                | Senate President  | ment For:<br>Primary<br>Other (spec | General cify) ▼              |              |                                     |          |  |       |           |     |                  |      |           |           |
| Γ              | State: District:  |                                     |                              |              |                                     |          |  |       |           |     |                  | 404  | 107.44    |           |
|                | SUBTOTAL of Disbursements This Page (optional) .  |                                     |                              |              |                                     |          | -  | •     | -         | +   | -                | 134  | 167.40    | ,         |
|                | <b>TOTAL</b> This Period (last page this line number only)  |                                     |                              | <br>         | •                                   |          |  |       |           |     |                  |      |           |           |

|           |  | 3 (FEC Form 3                                     | · 1       | Use sepa                           | rate schedule(s)             |    | FOR LINE             |                  | R:        |          | PAGE    | 169 /    | 183 |
|-----------|--|---|-----------|------------------------------------|------------------------------|----|----------------------|------------------|-----------|----------|---------|----------|-----|
| IT        | EMIZED DIS                             | SBURSEMENT  | S         |                                    | category of the Summary Page | 1- | (check onlock 21b 27 | 22<br>28a        | 23<br>28t |          | 4<br>8c | 25<br>29 |     |
|           |  | ed from such Reports a<br>poses, other than using |           |                                    |                              |    |                      |                  |           |          |         |          |     |
| $\rangle$ | NAME OF COMM<br>LIBERTARIAN            | MITTEE (In Full) NATIONAL COMM                    | ITTEE     |                                    | •••                          |    |                      |                  |           |          |         |          |     |
|           | Full Name (Last, I<br>QuickBooks Pa    | First, Middle Initial)<br>ayroll Service          |           |                                    |                              |    |                      |                  |           | D: SB    | 21B.27  | 7023     |     |
|           | Mailing Address                        | PO Box 30015                                      |           |                                    |                              |    |                      | 0 <sup>M</sup> 5 | M / I     | 13       | Y Y     | 0 ŏ 8    | Y   |
|           | City<br>Reno                           |   |           | tate<br>IV                         | Zip Code<br>89520-3015       |    |                      | Amou             | nt of Ea  | ch Disbu | irsemen |          | -   |
|           | Purpose of Disbu<br>Payroll Processing |   |           |                                    |                              | -  | 001                  |                  |           |          |         | 18.77    | _   |
|           | Candidate Name Office Sought:          | House   | Disbursen | oot For                            |                              |    | egory/<br>ype        |                  |           |          |         |          |     |
|           | Office Sought.                         | Senate President                                  |           | Primary<br>Other (spe              | General Cify) ▼              |    |                      |                  |           |          |         |          |     |
|           | •                                      | District: First, Middle Initial)                  |           |                                    |                              |    |                      | Trans            | action    | D: SB    | 21B.27  | 7024     |     |
|           | QuickBooks Pa                          | ayroll Service                                    |           |                                    |                              |    |                      | M                |           | rsement  | YYY     | Y        | Υ   |
|           | Mailing Address                        | PO Box 30015                                      |           |                                    |                              |    |                      | 0 5              |           | 13       | 2       | 0 0 8    |     |
|           | City<br>Reno                           |   |           | tate<br>IV                         | Zip Code<br>89520-3015       |    |                      | Amou             | nt of Ea  | ch Disbu |         |          |     |
|           | Purpose of Disbu<br>Payroll Processing |   |           |                                    |                              | -  | 001                  | L.               |           |          |         | 107.34   |     |
|           | Candidate Name                         |   |           |                                    |                              |    | egory/<br>ype        |                  |           |          |         |          |     |
|           | Office Sought:                         | House Senate President                            |           | nent For:<br>Primary<br>Other (spe | General cify) ▼              |    |                      |                  |           |          |         |          |     |
|           | State:<br>Full Name (Last, I           | District: First, Middle Initial)                  |           |                                    |                              |    |                      | Trans            | action    | D: SB    | 21B.27  | 7025     |     |
|           | QuickBooks Pa                          | ayroll Service                                    |           |                                    |                              |    |                      | Date             | of Disbu  | rsement  |         | 0 0 8    | Υ   |
|           | Mailing Address                        | PO Box 30015                                      |           |                                    |                              |    |                      | 0.5              |           | 27       | 2       | 008      |     |
|           | City<br>Reno                           |   |           | tate<br>IV                         | Zip Code<br>89520-3015       |    |                      | Amou             | nt of Ea  | ch Disbu | ırsemen |          | -   |
|           | Purpose of Disbu<br>Payroll Processing |   |           |                                    |                              | -  | 001                  |                  |           |          |         | 20.62    |     |
|           | Candidate Name                         |   |           |                                    |                              |    | egory/<br>ype        |                  |           |          |         |          |     |
|           | Office Sought:                         | House Senate President                            |           | nent For:<br>Primary<br>Other (spe | General cify) ▼              |    |                      |                  |           |          |         |          |     |
| _         | State:                                 | District:   |           |                                    |                              |    |                      |                  |           |          |         |          | _   |
|           | IRTOTAL of Dich                        | ursements This Page (                             | optional) |                                    |                              |    |                      |                  |           |          | 1       | 46.73    | }   |

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| SCHEDULE B (FEC Form 3X)  | Use separate                           | e schedule(s)         |    |                   | OR LIN      |    |                  | R:   |           |     | Р         | AGE    | 170             | / 183          |
|---|--|-----------------------|----|-------------------|-------------|----|------------------|------|-----------|-----|-----------|--------|-----------------|----------------|
| ITEMIZED DISBURSEMENTS  | for each cate<br>Detailed Sun          |                       |    | X                 |             | H  | 22<br>28a        |      | 23<br>28b | F   | 24<br>280 |        | 25<br>29        | 26<br>30b      |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                       |    |                   |             |    |                  |      |           |     |           |        |                 | 5              |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                       |    |                   |             |    |                  |      |           |     |           |        |                 |                |
| Full Name (Last, First, Middle Initial) QuickBooks Payroll Service  Mailing Address PO Box 30015          |  |                       |    |                   |             |    | Date o           |      |           | e   |           |        | 7026<br>Ž 0 Ď 8 | 3 <sup>Y</sup> |
|   | State Z                                | ip Code               |    |                   |             |    |                  | nt o |           | 1   | Disburs   |        |                 |                |
|   |  | 9520-3015             |    |                   |             |    | 7 11100          |      |           |     | 31000110  | 011101 | -               | -              |
| Purpose of Disbursement Payroll Processing Fee Candidate Name   |  |                       | Ca |                   | gory/       |    |                  |      | 0         |     |           |        | 13.2            | 2              |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary Other (specify       | General               |    | Тур               | oe          |    |                  |      |           |     |           |        |                 |                |
| Full Name (Last, First, Middle Initial) Kurt W. Rice  |  |                       |    |                   |             |    | Date o           | of D | isburs    |     |           |        |                 |                |
| Mailing Address 7801 S. Drexel Ave.   |  |                       |    |                   |             |    | 0 <sup>M</sup> 5 | М    | / D       | 0   | 1 /       | Y 2    | ž 0 ŏ 8         | 3 <sup>Y</sup> |
| City<br>Chicago   |  | ip Code<br>60619-0000 |    |                   |             |    | Amou             | nt o | f Eacl    | h [ | Disburs   | emer   | nt this         | Period         |
| Purpose of Disbursement Petitioning Expense   |  |                       |    | 00                | 1           |    |                  | _    |           |     |           | 1:     | 292.0           | 0              |
| Candidate Name  |  |                       |    | ateç<br>Tyr       | gory/<br>be |    |                  |      |           |     |           |        |                 |                |
| Senate President  | ment For:<br>Primary<br>Other (specify | General               |    |                   |             |    |                  |      |           |     |           |        |                 |                |
| State: District: Full Name (Last, First, Middle Initial)  |  |                       |    |                   |             | +. | <b>T</b>         |      |           | _   | SB21      | D 0    | 2000            |                |
| Kurt W. Rice  |  |                       |    |                   |             |    | Date o           |      | isburs    | e   | ment      |        |                 | V              |
| Mailing Address 7801 S. Drexel Ave.   |  |                       |    |                   |             |    | 0 5              |      | , L       | 1   | 5 ′       | 2      | ž o ŏ 8         | 3              |
| City<br>Chicago   |  | ip Code<br>60619-0000 |    |                   |             |    | Amou             | nt o | f Eacl    | h [ | Disburs   | -      | -               |                |
| Purpose of Disbursement Petitioning Expense   |  |                       |    | 00                |             |    | L.               |      |           |     |           | 1      | 005.0           | 0              |
| Candidate Name  |  |                       | Са | 00<br>ateg<br>Typ | gory/       |    |                  |      |           |     |           |        |                 |                |
| Office Sought: House Disburse Senate President  | ment For: Primary Other (specify       | General               |    | 71                |             |    |                  |      |           |     |           |        |                 |                |
| State: District:  | ( [)                                   | · •                   |    |                   |             |    |                  |      |           |     |           |        |                 |                |
| SUBTOTAL of Disbursements This Page (optional)  |  |                       |    |                   | <u> </u>    |    |                  |      |           |     |           | 23     | 310.2           | 2              |

|             |                                     | B (FEC Form                                   |          |                                   | arate schedule(s)               |   |               |           | INE N    | NUMBE            | R:    |                  |           | PA        | AGE  | 171      | / 183          |
|-------------|-------------------------------------|---|----------|-----------------------------------|---------------------------------|---|---------------|-----------|----------|------------------|-------|------------------|-----------|-----------|------|----------|----------------|
| 1 I         | EWIIZED DI                          | SBURSEMEN                                     | 119      |                                   | category of the<br>Summary Page |   | X             | 21k<br>27 | <u> </u> | 22<br>28a        |       | 23<br>28b        | $\square$ | 24<br>28c |      | 25<br>29 |                |
|             |                                     | ed from such Reports<br>rposes, other than us |          |                                   |                                 |   |               |           |          |                  |       |                  |           |           |      |          | s              |
| $\setminus$ | NAME OF COM                         | MITTEE (In Full)                              |          |                                   |                                 |   |               |           |          |                  |       |                  |           |           |      |          |                |
| <u>/</u>    | LIBERTARIAN                         | NATIONAL COM                                  | IMITTEE  |                                   |                                 |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | Full Name (Last,<br>Kurt W. Rice    | First, Middle Initial)                        |          |                                   |                                 |   |               |           |          |                  |       | ion ID           |           |           | 3.26 | 861      |                |
|             | Mailing Address                     | 7801 S. Drexe                                 | l Ave.   |                                   |                                 |   |               |           |          | o <sup>M</sup> 5 | М     | / D              | 2 1       | /         | Ž    | 0 0 8    | 8 <sup>Y</sup> |
|             | City<br>Chicago                     |   |          | State<br>IL                       | Zip Code<br>60619-0000          |   |               |           |          | Amou             | ınt c | f Each           | n Disk    | ourse     | men  | t this I | Period         |
|             | Purpose of Disb                     |   |          |                                   | 00010 0000                      | Г | 001           | 1         | 1        |                  |       |                  |           |           | 3    | 37.5     | 0              |
|             | Candidate Name                      |   |          |                                   |                                 | С | atego         | ory/      |          |                  |       |                  |           |           |      |          |                |
|             | Office Sought:                      | House Senate President                        | Disburse | ment For:<br>Primary<br>Other (sp | General ecify) ▼                |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | State:                              | District:                                     |          |                                   |                                 |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | Full Name (Last, Kurt W. Rice       | First, Middle Initial)                        |          |                                   |                                 |   |               |           |          |                  |       | ion ID<br>isburs |           |           | 3.26 | 862      |                |
|             | Mailing Address                     | 7801 S. Drexe                                 | l Ave.   |                                   |                                 |   |               |           |          | o <sup>M</sup> 5 | М     | / D2             | 28        | /         | Ž    | 0 0 8    | 3 <sup>Y</sup> |
|             | City<br>Chicago                     |   |          | State<br>IL                       | Zip Code<br>60619-0000          |   |               |           |          | Amou             | ınt c | f Each           | n Disk    | ourse     | men  | t this I | Perioc         |
|             | Purpose of Disb<br>Petitioning Expe |   |          |                                   |                                 |   | 001           | 1         | 1        | L.               |       |                  | •         |           | 11   | 02.0     | 0              |
|             | Candidate Name                      | •   |          |                                   |                                 | С | atego<br>Type | •         |          |                  |       |                  |           |           |      |          |                |
|             | Office Sought:                      | House<br>Senate<br>President                  | Disburse | ment For:<br>Primary<br>Other (sp | General ecify) ▼                |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | State:                              | District:                                     |          |                                   | •                               |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | Full Name (Last,<br>Eric D. Rittber | First, Middle Initial)                        | •        |                                   |                                 |   |               |           |          |                  |       | ion ID           |           |           | 3.26 | 864      |                |
|             | Mailing Address                     | 6 Chuckwagor                                  | n Ct.    |                                   |                                 |   |               |           |          | o <sup>M</sup> 5 | М     | / D2             | 2 1       | / [       | Ž    | 0 0 8    | 3 <sup>Y</sup> |
|             | City<br>Angleton                    |   |          | State                             | Zip Code<br>77515-0000          |   |               |           |          | Amou             | ınt c | f Each           | n Disk    | ourse     | men  | t this   | Period         |
|             | Purpose of Disb<br>Petitioning Expe |   |          |                                   |                                 | Г | 001           | 1         |          |                  | _     |                  |           |           | 18   | 399.5    | 0              |
|             | Candidate Name                      |   |          |                                   |                                 | С | atego<br>Type | ory/      | 1        |                  |       |                  |           |           |      |          |                |
|             | Office Sought:                      | House<br>Senate<br>President                  | Disburse | ment For:<br>Primary<br>Other (sp | General ecify) ▼                |   |               |           |          |                  |       |                  |           |           |      |          |                |
|             | State:                              | District:                                     |          | (36                               | <i>&gt;</i> / <b>▼</b>          |   |               |           |          |                  |       |                  |           |           |      |          |                |

TOTAL This Period (last page this line number only) .....

C.

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE          | NUMBER:                              | PAGE 172 / 183          |
|---|---|-------------------|--------------------------------------|-------------------------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only       |                                      |                         |
|   | Detailed Summary Page                             | X 21b 27          | 22 23<br>28a 28b                     | 24 25 26<br>28c 29 30b  |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                   |                                      |                         |
| NAME OF COMMITTEE (In Full)   | and address of any political                      | Committee to so   | iicit contributions mon              | i sucii committee       |
| LIBERTARIAN NATIONAL COMMITTEE  |   |                   |                                      |                         |
| Full Name (Last, First, Middle Initial)   |   |                   | Transaction ID:                      |                         |
| Eric D. Rittberg  |   |                   | Date of Disbursem                    |                         |
| Mailing Address 6 Chuckwagon Ct.  |   |                   | 0 5 3 0                              | 2008                    |
| •   | State Zip Code<br>TX 77515-0000                   |                   | Amount of Each D                     | isbursement this Period |
| Purpose of Disbursement   | 77313-0000  |                   |                                      | 2398.50                 |
| Petitioning Expense   |   | 001               |                                      |                         |
| Candidate Name  |   | Category/<br>Type |                                      |                         |
|   | ment For:   |                   |                                      |                         |
| Senate President  | Primary General Other (specify) ▼                 |                   |                                      |                         |
| State: District:  |   |                   |                                      |                         |
| Full Name (Last, First, Middle Initial) Sheraton Denver Hotel   |   |                   | Transaction ID: Date of Disbursem    |                         |
|   |   |                   | 0 5 DISBUISEN                        |                         |
| Mailing Address 1550 Court Plc Attn: Soulaiman Bahalla  |   |                   | 0.5                                  | 2008                    |
|   | State Zip Code<br>CO 80202-5107                   |                   | Amount of Each D                     | isbursement this Period |
| Purpose of Disbursement   | 00202 0107  |                   |                                      | 5000.00                 |
| Convention Catering & Meeting Expense  Candidate Name   |   | 002<br>Category/  |                                      |                         |
| Candidate Name  |   | Type              |                                      |                         |
| Office Sought: House Disburse   | ment For:  Primary General                        |                   |                                      |                         |
| President   | Other (specify)                                   |                   |                                      |                         |
| State: District:  |   |                   |                                      |                         |
| Full Name (Last, First, Middle Initial) South Carolina Dept. of Revenue                                   |   |                   | Transaction ID:<br>Date of Disbursem |                         |
| Mailing Address c/of Witholding   |   |                   | 0 5 D 1 3                            |                         |
| City  | State Zip Code                                    |                   | Amount of Each D                     | isbursement this Period |
|   | SC 29214-0004                                     |                   | Amount of Lacif D                    |                         |
| Purpose of Disbursement SC - Withholding  |   | 001               |                                      | 61.32                   |
| Candidate Name  |   | Category/         |                                      |                         |
| Office Sought: House Disburse   | ment For:   | Туре              |                                      |                         |
| Senate  | Primary General                                   |                   |                                      |                         |
| State: District:  | Other (specify)                                   |                   |                                      |                         |
|   |   |                   |                                      | 7450.00                 |
| SUBTOTAL of Disbursements This Page (optional) .  |   |                   |                                      | 7459.82                 |

| CHEDULE B (FEC Form 3X)   | Use separate schedule(s)                               |                | R LINE    |        |                 | ₹:     |                |          |     | PAC     | E 17     | 3 / 18 | 33  |
|---|--|----------------|-----------|--------|-----------------|--------|----------------|----------|-----|---------|----------|--------|-----|
| EMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page      | X              | 21b<br>27 | 2      | .)<br>22<br>88a | _      | 3<br>8b        |          | 2   | 4<br>8c | 25<br>29 |        | 26  |
| y Information copied from such Reports and Stater                             |  |                |           |        |                 |        |                |          |     |         |          |        |     |
| or commercial purposes, other than using the name                             | e and address of any political co                      | mmitte         | e to so   | DIICIT | contri          | oution | is tr          | om       | suc | cn cc   | mmitte   | ee     |     |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE                    |  |                |           |        |                 |        |                |          |     |         |          |        |     |
| Full Name (Last, First, Middle Initial) South Carolina Dept. of Revenue       |  |                |           |        | ransa<br>ate of |        |                | _        |     | 21B.    | .27029   | 9      |     |
| Mailing Address c/of Witholding   |  |                |           |        | 0 5             | /      | <sup>D</sup> 2 | 27       | /   | Y       | ž 0 (    | 8      |     |
| City<br>Columbia  | State Zip Code<br>SC 29214-0004                        |                |           | A      | mour            | t of E | ach            | n Dis    | sbu | irsem   | ent thi  | s Per  | iod |
| Purpose of Disbursement   | I  |                |           | Ĺ      |                 |        |                |          |     |         | 62       | .72    |     |
| SC - Withholding Candidate Name   |  | 001<br>Catego  | •         |        |                 |        |                |          |     |         |          |        |     |
| Office Sought: House Disburs Senate President State: District:                | ement For: Primary General Other (specify)             | Type           |           |        |                 |        |                |          |     |         |          |        |     |
| Full Name (Last, First, Middle Initial) South Carolina Dept. of Revenue       |  |                |           |        | ransa<br>ate of |        |                |          | _   | 21B.    | .2703    | 0      |     |
| Mailing Address c/of Witholding   |  |                |           |        | 0 5             | 1 /    | <sup>D</sup> 2 | 2 8<br>8 | ′   | Y       | ž 0 (    | 8      |     |
| City<br>Columbia  | State Zip Code<br>SC 29214-0004                        |                |           | Α      | mour            | t of E | ach            | n Dis    | sbu | irsem   | nent thi | s Per  | iod |
| Purpose of Disbursement<br>SC - Withholding                                   |  | 001            |           | L      |                 |        |                |          |     |         | 102      | .22    |     |
| Candidate Name  |  | Catego<br>Type |           |        |                 |        |                |          |     |         |          |        |     |
| Office Sought: House Senate President State: District:                        | ement For: Primary General Other (specify)             |                |           |        |                 |        |                |          |     |         |          |        |     |
| Full Name (Last, First, Middle Initial) Philip J. Speirs                      |  |                |           |        | ransa           |        |                |          |     | 21B.    | 2686     | 7      |     |
| Mailing Address 2092 Shippan Ave  |  |                |           |        | 0 5             | /      | D 2            | 2 1      | /   | Y       | ž 0 (    | 8      |     |
| City<br>Stamford  | State         Zip Code           CT         06902-0000 |                |           | A      | mour            | t of E | ach            | n Dis    | sbu | irsem   | ent thi  | -      | iod |
| Purpose of Disbursement<br>Petitioning Expense                                |  | 001            |           |        |                 |        |                |          |     |         | 168      | .00    |     |
| Candidate Name  |  | Catego<br>Type | -         |        |                 |        |                |          |     |         |          |        |     |
| Office Sought:    House   Disburs     Senate   President     State: District: | ement For: Primary General Other (specify)             |                |           |        |                 |        |                |          |     |         |          |        |     |
| UBTOTAL of Disbursements This Page (optional)                                 |  |                | <u> </u>  |        |                 |        |                | _        |     |         | 332.     | 94     | -   |
| OTAL This Period (last page this line number only                             |  |                | •         |        |                 |        |                |          |     |         |          |        |     |

C.

| SCHEDULE B (FEC Form 3)   | () Use separate schedule(s                            |                   | NUMBER: PAGE 174 / 183   |
|---|---|-------------------|--|
| TEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page        | (check on X 21b   | ny orie)<br>  22   |
|   |   | 27                | 28a 28b 28c 29 30b   |
| Any Information copied from such Reports an<br>or for commercial purposes, other than using |   |                   |  |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMI                                      | TTEE  |                   |  |
| Full Name (Last, First, Middle Initial) State Farm Insurance Com                            |   |                   | Transaction ID: SB21B.27031 Date of Disbursement   |
| Mailing Address PO Box 680001   |   |                   | $\begin{bmatrix} \begin{smallmatrix} M & S & M \\ 0 & 5 & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$ |
| City<br>Dallas  | State Zip Code<br>TX 75368-0001                       |                   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Liability Insurance  |   | 001               | 391.19   |
| Candidate Name  |   | Category/<br>Type |  |
| Office Sought: House Senate President State: District:                                      | Disbursement For:  Primary General  Other (specify) ▼ |                   |  |
| Full Name (Last, First, Middle Initial)   |   |                   | Transaction ID: SB21B.27033  |
| Chris C. Sutherland   |   |                   | Date of Disbursement   |
| Mailing Address 12100 Park Blvd.  | #402  |                   | $\begin{bmatrix} M & S & M \\ O & S & M \end{bmatrix} / \begin{bmatrix} D & D & B \\ D & S & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ D & O & N & M \end{bmatrix}$   |
| City<br>Seminole  | State Zip Code<br>FL 33772-0000                       | )                 | Amount of Each Disbursement this Period  |
| Purpose of Disbursement Petitioning Expense   |   | 001               | 2739.77  |
| Candidate Name  |   | Category/<br>Type |  |
| Senate President  | Disbursement For:  Primary General  Other (specify) ▼ |                   |  |
| State: District: Full Name (Last, First, Middle Initial)                                    |   |                   |  |
| Erin K. Taylor  |   |                   | Transaction ID: SB21B.26868 Date of Disbursement   |
| Mailing Address 339 Land's Mill   |   |                   | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$  |
| City<br>Marietta  | State Zip Code<br>GA 30067-0000                       | )                 | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>Employee Net Pay   |   | 001               | 60.32  |
| Candidate Name  |   | Category/<br>Type |  |
| Office Sought: House Senate President   | Disbursement For:  Primary General Other (specify) ▼  | •                 |  |
| State: District:  |   |                   |  |

| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS |  |            |                                 | rate schedule(s)                |             | OR LINE<br>heck onli | NUMBE            | R:         | Р         | AGE 175    | 7 183          |
|---|--|------------|---------------------------------|---------------------------------|-------------|----------------------|------------------|------------|-----------|------------|----------------|
| TEMIZEL   | y Information copied from such Reports and St          |            |                                 | category of the<br>Summary Page | X           |                      | 22<br>28a        | 23<br>28b  | 24<br>28c | 25<br>29   |                |
|   | n copied from such Repor<br>ial purposes, other than u |            |                                 |                                 |             |                      |                  |            |           |            |                |
| NAME OF   | COMMITTEE (In Full)<br>RIAN NATIONAL COI               |            |                                 |                                 |             |                      |                  |            |           |            |                |
| Full Name<br>Tekno So                           | (Last, First, Middle Initial)<br>Iutions               |            |                                 |                                 |             |                      |                  | action II  | _         | B.27035    |                |
| Mailing Add                                     | dress c/of Patrick K<br>3917 Holliday                  |            |                                 |                                 |             |                      | o <sup>M</sup> 5 | M / D      | 06        | žoŏ        | 8 <sup>Y</sup> |
| City<br>Dallas                                  | oo in Homody   | Sta        |                                 | Zip Code<br>75224-0000          |             |                      | Amou             | int of Eac | h Disburs | ement this |                |
| Petitioning                                     | <u>'</u>   |            |                                 |                                 | 00          |                      | L.               |            |           | 5000.0     | 00             |
| Candidate I                                     |  | 1          |                                 |                                 | Cate<br>Ty  |                      |                  |            |           |            |                |
| Office Sou                                      | Senate President                                       |            | ent For:<br>rimary<br>ther (spe | General cify) ▼                 |             |                      |                  |            |           |            |                |
| State:  | District: (Last, First, Middle Initial)                |            |                                 |                                 |             |                      |                  |            |           |            |                |
| Tekno So  | ,  |            |                                 |                                 |             |                      | Date             | of Disbur  | sement    | B.27036    |                |
| Mailing Add                                     | dress c/of Patrick K<br>3917 Holliday                  | elly<br>Rd |                                 |                                 |             |                      | o <sup>M</sup> 5 | M / D      | 3 0 /     | žoŏ        | 8              |
| City<br>Dallas                                  |  | Sta<br>T>  |                                 | Zip Code<br>75224-0000          |             |                      | Amou             | int of Eac | h Disburs | ement this |                |
| Petitioning                                     | •  |            |                                 |                                 | 00          |                      |                  |            |           | 1500.0     | JO             |
| Candidate I                                     | Name   |            |                                 |                                 | Cate<br>Typ |                      |                  |            |           |            |                |
| Office Soug                                     | ght: House Senate President District:                  |            | ent For:<br>rimary<br>ther (spe | General cify) ▼                 |             |                      |                  |            |           |            |                |
|   | (Last, First, Middle Initial)<br>oute Corporation      | •          |                                 |                                 |             |                      |                  | of Disbur  | sement    | B.27037    |                |
| Mailing Add                                     | dress P.O. Box 106                                     | 019        |                                 |                                 |             |                      | 0 <sup>M</sup> 5 | M / D      | 15        | žoŏ        | 8 <sup>Y</sup> |
| City<br>Atlanta                                 |  | Sta<br>G   |                                 | Zip Code<br>30348-6019          |             |                      | Amou             | int of Eac | h Disburs | ement this |                |
| Phone and                                       | Disbursement<br>Data Services                          |            |                                 |                                 | 00          |                      | L.               |            |           | 51.3       | 37             |
| Candidate I                                     |  | 1 500      |                                 |                                 | Cate<br>Typ |                      |                  |            |           |            |                |
| Office Sou                                      | ght: House Senate President                            |            | ent For:<br>rimary<br>ther (spe | General cify) ▼                 |             |                      |                  |            |           |            |                |
|   |  |            |                                 |                                 |             |                      |                  |            |           |            |                |
| State:  | District:  |            |                                 |                                 |             |                      |                  |            |           | 6551.3     |                |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s) for each category of the |                |          | E NUMI    | BER:           |                       | P               | AGE       | 176 /         | 183    |
|---|---|----------------|----------|-----------|----------------|-----------------------|-----------------|-----------|---------------|--------|
| ITEMIZED DISBURSEMENTS  | 21b<br>27   | 22             | a F      | 23<br>28b | 24<br>28c      |                       | 25<br>29        | 26<br>30b |               |        |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |   |                |          |           |                |                       |                 |           |               | 5      |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |   |                |          |           |                |                       |                 |           |               |        |
| Full Name (Last, First, Middle Initial) Telecompute Corporation  Mailing Address P.O. Box 106019          |   |                |          |           | e of           | ction ID:<br>Disburse |                 |           | 7038<br>0 ŏ 8 | B Y    |
| City  | State Zip Code<br>GA 30348-6019                   |                |          | Am        | ount           |                       | Disburse        | emen      | t this F      | Period |
| Purpose of Disbursement Phone and Data Services Candidate Name  | 001<br>Catego                                     |                |          |           |                |                       | •               | 55.50     | )             |        |
| Office Sought:    House   Disburse     Senate   President     State: District:                            | 9   |                |          |           |                |                       |                 |           |               |        |
| Full Name (Last, First, Middle Initial) Terra Eclipse, Inc.  Mailing Address 9043 Soquel Dr.              |   |                |          | _         | e of           | Disburs               | SB21 ement      |           | 7039<br>0 ŏ 8 | y Y    |
| ,   | State Zip Code CA 95003-0000                      |                |          | Am        | ount           | of Each               | Disburse        | emen      | t this F      | Period |
| Purpose of Disbursement Website Migration and Development   |   | 001            |          |           |                |                       |                 | 33        | 346.6         | 3      |
| Candidate Name  |   | Catego<br>Type | •        |           |                |                       |                 |           |               |        |
| Office Sought: House Disburse Senate President State: District:   | ment For: Primary General Other (specify)         |                |          |           |                |                       |                 |           |               |        |
| Full Name (Last, First, Middle Initial) Ticketmaster  |   |                |          |           |                | ction ID:<br>Disburs  | : SB21<br>ement | B.27      | '040          |        |
| Mailing Address 1601 Elm St., Ste. 700  |   |                |          | O         | 5 <sup>M</sup> | / D3                  | 3 <b>1</b> /    | 2         | 0 0 8         | 3 Y    |
|   | State Zip Code<br>TX 75201-0000                   |                |          | Am        | ount           | of Each               | Disburse        |           |               |        |
| Purpose of Disbursement<br>Credit Card Processing Fee   |   | 001            | _        | L         | •              |                       |                 | 1         | 54.99         | 9      |
| Candidate Name  Office Sought: House Disburse Senate  | ment For: Primary General                         | Catego<br>Type | •        |           |                |                       |                 |           |               |        |
| President State: District:  | Other (specify)                                   |                |          |           |                |                       |                 |           |               |        |
| SUBTOTAL of Disbursements This Page (optional) .  |   |                | <u> </u> |           |                |                       |                 | 35        | 57.17         | 7      |

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE                 |                                       | PAGE 177 / 183        |
|---|--|--------------------------|---------------------------------------|-----------------------|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page | (check only              | rone)<br>☐ 22   ☐ 23   ☐              | 24 25 26              |
|   |  | 27                       | 28a 28b                               | 28c 29 30b            |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |  |                          |                                       |                       |
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE  |  |                          |                                       |                       |
| Full Name (Last, First, Middle Initial)   |  |                          | Transaction ID: S                     | P01P 07041            |
| Verizon Wireless  |  |                          | Date of Disbursemen                   | nt                    |
| Mailing Address PO Box 25505  |  |                          | 05  30                                | Ž 0 0 8 Y             |
|   | State Zip Code<br>PA 18002-5505                |                          | Amount of Each Disl                   | oursement this Period |
| Purpose of Disbursement Cell Phone Services   |  | 001                      |                                       | 233.64                |
| Candidate Name  |  | 001<br>Category/<br>Type |                                       |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      | Турс                     |                                       |                       |
| State: District:  | Other (specify)                                |                          |                                       |                       |
| Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation  |  |                          | Transaction ID: S Date of Disbursemen | -                     |
| Mailing Address PO Box 26644  |  |                          | 05 13                                 | Ý 2008 Y              |
| City<br>Richmond  | State Zip Code<br>VA 23261-6644                |                          | Amount of Each Disl                   | oursement this Period |
| Purpose of Disbursement VA - Withholding  |  | 001                      |                                       | 465.00                |
| Candidate Name  |  | Category/<br>Type        |                                       |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      |                          |                                       |                       |
| State: District:  |  |                          |                                       |                       |
| Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation  |  |                          | Transaction ID: S Date of Disbursemen |                       |
| Mailing Address PO Box 26644  |  |                          | 05 13                                 | 2008                  |
|   | State Zip Code<br>VA 23261-6644                |                          | Amount of Each Disl                   | oursement this Period |
| Purpose of Disbursement VA - Withholding  |  | 001                      |                                       | 517.00                |
| Candidate Name  |  | Category/<br>Type        |                                       |                       |
| Office Sought: House Disburse Senate President  | ment For: Primary General Other (specify)      | турс                     |                                       |                       |
| State: District:  | (opoon)) <b>V</b>                              |                          |                                       |                       |
| SUBTOTAL of Disbursements This Page (optional)  |  |                          |                                       | 1215.64               |

C.

| SCHEDULE B (FEC Form 3X)  |                                    | arate schedule(s)               |          |     | OR LIN         |                  | R:   |                             |     | PA        | GE     | 178 /         | 183   |           |
|---|------------------------------------|---------------------------------|----------|-----|----------------|------------------|------|-----------------------------|-----|-----------|--------|---------------|-------|-----------|
| ITEMIZED DISBURSEMENTS  |                                    | category of the<br>Summary Page |          | X   | _              | 22<br>28a        |      | 23<br>28b                   | F   | 24<br>28c |        | 25<br>29      | П     | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) |                                    |                                 |          |     |                |                  |      |                             |     |           |        |               | ;     |           |
| LIBERTARIAN NATIONAL COMMITTEE  |                                    |                                 |          |     |                |                  |      |                             |     |           |        |               |       |           |
| Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation  Mailing Address PO Box 26644                                      |                                    |                                 |          |     |                | Date o           |      | isburs                      |     |           |        | '044<br>0 0 8 | 3 Y   |           |
|   | State                              | Zip Code                        |          |     |                | Amou             | nt o | f Each                      |     | isburse   |        |               |       |           |
|   | VA                                 | 23261-6644                      |          |     |                | AIIIOU           | ni o | Laci                        | טו  | isburse   | -      | -             |       | J         |
| Purpose of Disbursement VA - Withholding Candidate Name   |                                    |                                 |          | O(  | 01<br>gory/    |                  |      | •                           |     |           | - 4    | 177.00        | )     |           |
| 0(f) = 0 = 11   D)   D)   |                                    |                                 | 7        | Ту  | ре             |                  |      |                             |     |           |        |               |       |           |
| Office Sought: House Disburse Senate President State: District:   | ment For:<br>Primary<br>Other (spe | General <b>▼</b>                |          |     |                |                  |      |                             |     |           |        |               |       |           |
| Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation  |                                    |                                 |          |     |                |                  |      | ion ID:                     |     | SB21E     | 3.27   | '045          |       |           |
| Mailing Address PO Box 26644  |                                    |                                 |          |     |                | 0 <sup>M</sup> 5 | М    | <sup>/</sup> <sup>D</sup> 2 | 2 8 | / Y       | ž      | ο ὁ ε         | B Y   |           |
| ,   | State<br>VA                        | Zip Code<br>23261-6644          |          |     |                | Amou             | nt o | f Each                      | ı D | isburse   | men    | t this F      | Perio | t         |
| Purpose of Disbursement VA - Withholding  |                                    | 20201 0011                      |          | O(  | )1             | L.               |      |                             |     |           | 5      | 68.00         | )     |           |
| Candidate Name  |                                    |                                 |          |     | gory/<br>pe    |                  |      |                             |     |           |        |               |       |           |
| Senate President  | ment For:<br>Primary<br>Other (spe | General <b>▼</b>                |          |     |                |                  |      |                             |     |           |        |               |       |           |
| State: District: Full Name (Last, First, Middle Initial)  |                                    |                                 |          |     |                | Trane            | acti | ion ID                      |     | SB21E     | 3 27   | 7050          |       |           |
| Walton Press  |                                    |                                 |          |     |                | Date o           | of D | isburs                      | em  | ent       | J. Z 1 | 000           |       |           |
| Mailing Address 402 Mayfield Dr<br>PO Box 966   |                                    |                                 |          |     |                | 0 <sup>M</sup> 5 | М    | / D 1                       | 5   | / Y       | ž      | ο ὁ ε         | 3 Y   |           |
|   | State<br>GA                        | Zip Code<br>30655-0000          |          |     |                | Amou             | nt o | f Each                      | ı D | isburse   | men    | t this F      | Perio | b         |
| Purpose of Disbursement Non Candidate Party Printing  |                                    |                                 |          | 'n  | 03             | L.               | _    |                             |     |           | 24     | 160.3         | 5     |           |
| Candidate Name  |                                    |                                 | Ca       | ate | gory/<br>pe    |                  |      |                             |     |           |        |               |       |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General                         | <u>'</u> | - 7 | r <del>-</del> |                  |      |                             |     |           |        |               |       |           |
| State: District:  | Outor (spe                         | ,y) <b>▼</b>                    |          |     |                |                  |      |                             |     |           |        |               |       |           |
| SUBTOTAL of Disbursements This Page (optional) .  |                                    |                                 |          |     | <u> </u>       |                  | ·    |                             |     |           | 35     | 05.3          | 5     |           |

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use sepa                           | urate schedule(s)             |      | OR LII               |   |                  | R:    |           |     | P         | AGE  | 179      | / 183          | 3         |
|---|------------------------------------|-------------------------------|------|----------------------|---|------------------|-------|-----------|-----|-----------|------|----------|----------------|-----------|
| ITEMIZED DISBURSEMENTS  |                                    | category of the Category Page | _    | check (<br>21b<br>27 |   | 22<br>28a        | Н     | 23<br>28b | F   | 24<br>28c | F    | 25<br>29 | П              | 26<br>30b |
| Any Information copied from such Reports and Statem or for commercial purposes, other than using the name |                                    |                               |      |                      |   |                  |       |           |     |           |      |          | s              |           |
| NAME OF COMMITTEE (In Full)   |                                    |                               | <br> |                      |   |                  |       |           |     |           |      |          |                |           |
| LIBERTARIAN NATIONAL COMMITTEE  |                                    |                               |      |                      |   |                  |       |           |     |           |      |          |                |           |
| Full Name (Last, First, Middle Initial)<br>Warner, Norcross & Judd  |                                    |                               |      |                      |   |                  |       | isburs    | en  |           | B.27 | 7047     |                |           |
| Mailing Address 1900 Fifth Third Center 111 Lyon Street NW  |                                    |                               |      |                      |   | 0 <sup>M</sup> 5 | М     | / D       | ) - | D / 1     | Ž    | 2 o ŏ    | 3 <sup>Y</sup> |           |
| ,   | State<br>MI                        | Zip Code<br>49503-2487        |      |                      |   | Amou             | ınt o | f Each    | n E | Disburse  | -    | -        |                | d         |
| Purpose of Disbursement<br>Legal Services   |                                    |                               | 0    | 01                   |   | L.               |       | -         |     |           | 20   | 634.0    | 0              |           |
| Candidate Name  |                                    |                               |      | egory/<br>ype        |   |                  |       |           |     |           |      |          |                |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General cify) ▼               |      |                      |   |                  |       |           |     |           |      |          |                |           |
| State: District:  |                                    |                               |      |                      |   |                  |       |           |     |           |      |          |                |           |
| Full Name (Last, First, Middle Initial) Whitaker Brothers, Inc.   |                                    |                               |      |                      |   | Date             | of D  | isburs    | en  |           |      |          | V              |           |
| Mailing Address 12410 Washington Ave. Attn: Gene Vetere   |                                    |                               |      |                      |   | 0 <sup>M</sup> 5 | М     | / D       | 0 6 | 6 /       | ž    | o ŏ      | 3 <sup>*</sup> |           |
| ,   | State<br>MD                        | Zip Code<br>20852-0000        |      |                      |   | Amou             | ınt o | f Each    | n E | Disburse  | -    |          |                | d         |
| Purpose of Disbursement Postage Machine Yearly Maint Contract   |                                    |                               | 0    | 01                   |   | L.               | _     |           |     |           | 4    | 475.0    | 0              |           |
| Candidate Name  |                                    |                               |      | egory/<br>ype        |   |                  |       |           |     |           |      |          |                |           |
| Office Sought: House Disburse Senate President  | ment For:<br>Primary<br>Other (spe | General cify) ▼               |      |                      |   |                  |       |           |     |           |      |          |                |           |
| State: District:  |                                    |                               |      |                      | _ |                  |       |           |     |           |      |          |                |           |
| Full Name (Last, First, Middle Initial) Worldwide Express - DHL   |                                    |                               |      |                      |   |                  | of D  | isburs    | en  |           |      |          |                |           |
| Mailing Address 1911 North Ft. Myer Dr. S   | Ste 108                            |                               |      |                      |   | 0 5              | М     | / D       | 1 5 | 5 /       | ž    | Óοδ      | 3 <sup>*</sup> |           |
|   | State<br>VA                        | Zip Code<br>22209-0000        |      |                      |   | Amou             | ınt o | f Each    | n E | Disburse  | emer |          |                | od        |
| Purpose of Disbursement<br>Shipping Service   |                                    |                               | Ó    | 01                   |   | L.               | _     |           |     |           |      | 42.6     | 1              |           |
| Candidate Name  |                                    |                               |      | egory/<br>ype        |   |                  |       |           |     |           |      |          |                |           |
| Senate President  | ment For:<br>Primary<br>Other (spe | General cify) ▼               |      |                      |   |                  |       |           |     |           |      |          |                |           |
| State: District:  |                                    |                               |      |                      |   | _                | _     |           | _   |           | _    |          |                | _         |
| SUBTOTAL of Disbursements This Page (optional) .  |                                    |                               | <br> | . •                  | • | L.               |       |           |     |           | 31   | 51.6     | 1              | _         |
| TOTAL This Period (last page this line number only)   |                                    |                               | <br> | . •                  | • |                  |       | _         |     |           |      | -        |                |           |

State:

A.

District:

| _         |   | /EEO E                       |             |                                    |                       |        |   |           |           |       |           |        |              |    |              |     |           |
|-----------|---|------------------------------|-------------|------------------------------------|-----------------------|--------|---|-----------|-----------|-------|-----------|--------|--------------|----|--------------|-----|-----------|
|           | CHEDULE B   | •                            | , i         |                                    | arate sche            |        |   | OR LIN    | <br>UMBE  | R:    |           |        | PA           | GE | 180 /        | 183 |           |
| IT        | EMIZED DIS  | BURSEMEN                     | ITS         |                                    | category o<br>Summary |        | X | 21b<br>27 | 22<br>28a | Н     | 23<br>28b | $\Box$ | 24<br>28c    |    | 25<br>29     |     | 26<br>30b |
|           | ny Information copied<br>for commercial purpe             |                              |             | •                                  |                       | •      | • | •         |           | •     |           |        | -            |    |              |     |           |
| $\rangle$ | NAME OF COMMI<br>LIBERTARIAN N                            | , ,                          | MITTEE      |                                    |                       |        |   |           |           |       |           |        |              |    |              |     |           |
|           | Full Name (Last, Fi<br>Worldwide Expre<br>Mailing Address |                              | Myer Dr. S  | Ste 108                            |                       |        |   |           | Date o    |       | sburs     | _      | BB21B<br>ent |    | 051<br>0 0 8 | Y   |           |
|           | City<br>Arlington   |                              | -           | State<br>VA                        | Zip Cod<br>22209      |        |   |           | Amou      | nt of | Each      | Dis    | burser       | -  |              | -   | d         |
|           | Purpose of Disburs<br>Shipping Service                    | 1                            |             | -                                  |                       |        |   | - 2       | 70.75     | )     |           |        |              |    |              |     |           |
|           | Candidate Name  |                              | ateg<br>Typ |                                    |                       |        |   |           |           |       |           |        |              |    |              |     |           |
|           | Office Sought:  | House<br>Senate<br>President | Disburser   | nent For:<br>Primary<br>Other (spe |                       | eneral |   |           |           |       |           |        |              |    |              |     |           |

|   |   | 270.75    |
|---|---|-----------|
| SUBTOTAL of Disbursements This Page (optional)      |   | 270.75    |
|   |   |           |
| TOTAL This Period (last page this line number only) | • | 221043.37 |

## PAGE 181 / 183 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing Advanced Mailing Services, LLC Mailing Address 14970 Farm Creek Drive State ZIP Code City Woodbridge VA 22191-3550 Outstanding Balance Beginning This Period Transaction ID: SD10.22400 1496.95 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 1496.95 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing Advanced Mailing Services, LLC Mailing Address 14970 Farm Creek Drive 7IP Code City State Woodbridge VA 22191-3550 Outstanding Balance Beginning This Period Transaction ID: SD10.27152 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1306.04 0.00 1306.04 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **B & B Duplicators** Non Candidate Party Print-Mailing Address 818 18th Street NW LL15 ZIP Code City State Washington DC 20006-0000 Outstanding Balance Beginning This Period Transaction ID: SD10.22402 4669.92 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4669.92 0.00 1306.04 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

# SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE 182 / 183

| FOR LINE NUMBER: |  |
|------------------|--|
| (check only one) |  |
|                  |  |

| Excluding Loans   | Loans                                       |                     | X 10   |  |
|---|---|---------------------|--|--|
| NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMIT                       | TEE   |                     |  |  |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gloette Hess |   | Conventi            | Nature of Debt (Purpose):<br>Convention Parliamentarian<br>Expense |  |
| Mailing Address PO Box 6876   |   |                     |  |  |
| City State Denver CO  | ZIP Code<br>80206                           |                     |  |  |
| Outstanding Balance Beginning This  | s Period                                    | Tr                  | ansaction ID: SD10.27153   |  |
| 0.00  | <u>.</u>                                    |                     |  |  |
| Amount Incurred This Period   | Payment This Period                         | d Outstand          | ling Balance at Close of This Period                               |  |
| 1000.00   |   | 0.00                | 1000.00  |  |
| B. Full Name (Last, First, Middle Initial Joe Ragan's                         | l) of Debtor or Creditor                    | Nature of Office Su | Debt (Purpose):<br>upplies   |  |
| Mailing Address PO Box 125  |   |                     |  |  |
| City State Soringfield VA   | ZIP Code<br>22150-0125                      |                     |  |  |
| Outstanding Balance Beginning This  | s Period                                    | Tr                  | ansaction ID: SD10.22403   |  |
| 501.32  |   |                     |  |  |
| Amount Incurred This Period   | Payment This Period                         | d Outstand          | ling Balance at Close of This Period                               |  |
| 0.00  | 50  | 1.32                | 0.00   |  |
| C. Full Name (Last, First, Middle Initial Sheraton Denver Hotel               | l) of Debtor or Creditor                    |                     | Debt (Purpose):<br>on Catering Expen-                              |  |
| Mailing Address 1550 Court Plc Attn: Soulaiman I                              | Bahalla                                     |                     |  |  |
| City State Denver CO  | ZIP Code<br>80202-5107                      |                     |  |  |
| Outstanding Balance Beginning This  | s Period                                    | Tr                  | ansaction ID: SD10.27149   |  |
| 0.00  |   |                     |  |  |
| Amount Incurred This Period   | Payment This Period                         | d Outstand          | ling Balance at Close of This Period                               |  |
| 5579.21   |   | 0.00                | 5579.21  |  |
| 1) SUBTOTALS This Period This Page  | (optional)                                  | <b>&gt;</b>         | 6579.21  |  |
| 2) TOTALS This Period (last page this lin                                     | ne number only)                             | <b>&gt;</b>         |  |  |
| 3) TOTAL OUTSTANDING LOANS fr   | rom Schedule C (last page only)             |                     |  |  |
| 4) ADD 2) and 3) and carry forward to a                                       | appropriate line of Summary Page (last page | e only)             |  |  |

### PAGE 183 / 183 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) LIBERTARIAN NATIONAL COMMITTEE Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Non Candidate Party Printing Walton Press Mailing Address 402 Mayfield Dr PO Box 966 State City ZIP Code 30655-0000 Monroe GΑ Outstanding Balance Beginning This Period Transaction ID: SD10.22404 2460.35 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2460.35 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Print-Walton Press Mailing Address 402 Mayfield Dr PO Box 966 7IP Code City State Monroe GA 30655-0000 Outstanding Balance Beginning This Period Transaction ID: SD10.27150 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 2673.10 0.00 2673.10 Nature of Debt (Purpose): C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Worldwide Express - DHL **Shipping Services** Mailing Address 1911 North Ft. Myer Dr. Ste 108 ZIP Code City State Arlington 22209-0000 VΑ Outstanding Balance Beginning This Period Transaction ID: SD10.27151 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1455.47 0.00 1455.47 4128.57 1) SUBTOTALS This Period This Page (optional)..... 12013.82 2) TOTALS This Period (last page this line number only).....

12013.82

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)